

UNIVERSITY TUTORIAL SERVICES

Learning Assistance Programs and TRIO/Student Support Services

INFORMATION FOR LEARNING ASSISTANTS:

1. **All Learning Assistants must be undergraduate students and have earned an “A” or “B” in all classes they wish to tutor. Learning Assistants must also maintain a minimum cumulative GPA of 3.0.** Grades will be verified. Appropriate departmental approval may also be required.
2. **Complete and read each section of this application in its entirety, with the exception of the Learning Assistant Reference Check Form, and return to University Tutorial Services, located in room 412 of Kent Library.**
3. **Retrieve and read the Southeast MO State University Student Code of Conduct from www6.semo.edu/judaffairs/code.html**
4. **Give the Learning Assistant Reference Check Form to an appropriate party along with the provided campus mail marked envelope.** University Tutorial Services prefers that you, the applicant, choose a former instructor in the academic area for which you are applying to be your academic reference. Your chosen reference may fill out the Check Form and, using the provided envelope, return the completed form to University Tutorial Services through campus mail.
5. **Along with the completed Learning Assistant Application, please provide a complete Student Degree Audit, which is updated through your most recently completed semester.** This can be found either on the Southeast Portal under your student tab, labeled DegreeWorks Student, or from your academic advisor.
6. **Applications will not be reviewed until all required information has been provided to University Tutorial Services.** Once the application process is complete, your application will be reviewed by the University Tutorial Services staff. After review of said application a University Tutorial Services staff member will contact you via e-mail or phone to let you know of your application status.
7. Any questions or concerns should be directed to:

University Tutorial Services
Kent Library 412
(573)651-2861
tutorialservices@semo.edu.

Please keep this page for your records.

University Tutorial Services

Learning Assistance Programs and TRIO-Student Support Services

Employment Application

Personal Data: (Please Print Legibly)

Name: _____
(Last) (First) (MI)

Local Address: _____
(#/Apt/Street) (City) (State) (Zip)

Local Phone Number: (_____) _____ Voicemail? _____

Best Time To Call: _____

SE E-Mail: _____

Birth Date: _____ Student ID#: _____

Subject(s) Applied For: _____

Academic Data: (Please Print Legibly)

Classification: Freshman () Sophomore () Junior () Senior ()

College credits as of last term: _____

Major: _____

Cumulative GPA: _____ GPA (Major): _____

EDUCATIONAL BACKGROUND:

High School: _____
(Name) (Location)

Other Colleges Attended:

(Name) (Location)

I AM INTERESTED IN TUTORING STUDENTS IN THE FOLLOWING COURSES:

Class (course number and name)	Grade	Department Approval (office only)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY:

Presently working in another department on campus? Yes_____ No_____

If Yes, list the Department(s):

1. _____

2. _____

If Yes, how many hours weekly? _____

If employed in another department, how are you paid?

Monthly ()

Bi-Monthly ()

Graduate Asst ()

Previous Tutoring Experiences: (list subject matter, dates, department/employer)

1. _____

2. _____

3. _____

Anticipated involvement in campus/work activities next term: (includes hobbies, clubs, organizations, part-time employment, etc.)

1. _____
2. _____
3. _____

Honor Societies, professional memberships, honors/awards: (list membership & offices held)

1. _____
2. _____
3. _____

Academic References:

(Name)	(Address)
(Phone)	(Relationship)
(Name)	(Address)
(Phone)	(Relationship)

If selected for this position, I will be able to attend the Tutor Trainings. Yes_____ No_____

I hereby attest that all the information stated in this application to be truthful and accurate.

Signature: _____

Date: _____

(For Office Use Only)

Application Status: Reference Check Form Received Degree Audit Received Entered into Tracking Sheet

Contact Date: Initials:

University Tutorial Services
Learning Assistance Programs and TRIO-Student Support Services

LEARNING ASSISTANT REFERENCE CHECK FORM

Applicant: _____ Reference: _____

Date: _____ Relationship to Applicant: _____

1. How do you see the applicant contributing to the program? What strengths will he/she bring to the tutorial program?

2. Does the applicant complete work in a timely fashion? Is the applicant dependable? What is the quality of his/her work? Are there any areas for improvement? (IF FORMER EMPLOYER: Would you hire the applicant again?)

3. Are there opportunities of which you are aware in which the applicant has worked with members of diverse populations? How did the applicant work within this context?

4. Do you have anything else you would like to share regarding the applicant?

Thank you for your assistance in maintaining the quality of the University Tutorial Program.
Please return this form to: University Tutorial Services, Kent Library, Room 412, MS 4675.