Tutoring Application

Name ____________________________ Date _________________________
Cell Phone __________________________ ID# __________________________
Email Address(es) ______________________________________________________________

Academic Level: Fr  So  Jr  Sr

How many hours a week can you dedicate to the tutoring program (**tutors are required to meet a minimum of twice a week**)? __________

Have you tutored at Catawba before? _____Yes _____No

Are you currently employed by the college? _____Yes _____No

- I understand that Tutoring Services may allow me to tutor based on my placement testing in certain courses such as foreign language or math.
- I understand that I must complete all necessary paperwork to be placed on the College payroll as a tutor.
- I understand that I must submit my online time sheets and communication sheets when they are due (as outlined by Academic Support Services) in order to be paid on time.
- I understand that failure to submit my online time sheet and communication sheets when they are due will result in not being paid until the next pay period.
- I understand that all tutoring must be conducted in the library unless otherwise approved.

**YOUR APPLICATION IS NOT COMPLETE WITHOUT ATTACHING A COPY OF YOUR STUDENT AUDIT & HIGHLIGHTING CLASSES YOU WOULD LIKE TO TUTOR**

Signature ____________________________ Date _________________________

Return complete form to: Tutoring Services Office
Student Affairs Suite, Cannon Student Center
704-637-4373