

Volunteer Registration Form

Please fill out form and return to <u>pocolit2013@gmail.com</u> or PCLC, 1209 Fremont Street, 209 Nelson Hall, Stevens Point, WI 54481

Date: _____

Basic Tutor	Information		
Name:		Date of Birth:	Gender:
Address:		City:	Zip:
Email:		Phone (home or cell):	Employer:
Race/Ethnic	tity (optional): Asian 🛛	Black/African American D	Pacific Islander 🗆
Hispanic 🗆	Non-Hispanic (white)	Native American	Other:
Emergency	Contact Person:	Relationship:	Phone:

What is the highest level of education you have completed?

- □ High School Diploma
- □ Some College/Technical School
- □ Associate's Degree at a Technical School: _____
- □ B.A. or B.S. at a college or university Major: Minor:
- □ Other: _____

Have you studied any other languages? (please include proficiency level)

1	Skill level:	□Low	Conversational Proficiency	□Fluent
2	Skill level:	□ Low	□Conversational Proficiency	□ Fluent

What type of learner are you interested in tutoring? (We work with adult basic education and English language learners. Note your level of comfort working with different learning abilities.)

Please indicate your skills and interests.

□ Reading □Writing □Math □English Language Learning □Health literacy □Workforce skills □Small group (<5)

Please note any other information about yourself that may help us place you with a learner. (E.g. Cultural study, travel experience, tutor experience, strengths and weaknesses)

Are you willing/able to commit to tutoring for at least 6 months?					🗆 No
Student Preference:	□ Male	Female	No Preference		

If you have any questions, concerns, or need additional support in your tutoring placement, please include that information in your email or contact Kristy at 715-345-5341.

Most tutors meet with their learners for 2-3 hours a week. Others meet longer. How many hours/week are you available to work with a learner? ____ hours/week

Where in Portage County are you willing to travel to tutor? (e.g. Stevens Point, Plover, Almond, Amherst, Rosholt)

Do you have access to a car? \Box Yes \Box No

Preferred Day(s) & Times for Tutoring:	(Please check all that are applicable.)
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	Monday	Tuesday	Wednesday	Thursday	Friday
9:00-10:00 a.m.					
10:00-11:00 a.m.					
11:00 a.m Noon					
Noon – 1:00 p.m.					
1:00-2:00 p.m.					
2:00-3:00 p.m.					
3:00-4:00 p.m.					
4:00-5:00 p.m.					
5:00-6:00 p.m.					
6:00-7:00 p.m.					
7:00-8:00 p.m.					

How soon can you begin tutoring?

Is there any time of year that you are not available?

Do you have a medical condition that may impact tutoring? Yes	No
Please explain.	

Have you ever been convicted of a crime? ___ Yes ___ No If yes, what was the nature of the crime and the date of conviction?

Please list one personal or professional reference that we can contact:

 Name:
 Phone:

Please indicate your agreement to the below terms of volunteering:

□ I consent to a routine background check before being placed with a learner.

□ I agree to meet with my learner in a public location.

□ I agree to keep private information about my learner confidential.

Signed:	Date:		
Office Use Only			
Learner Match:	Date Matched//		
Learner Match:	Date Matched//		