|  |
| --- |
| **Basic Tutor Information** |
| **Name:** | **Date of Birth:** | **Gender & Pronouns:** |
| **Address:** | **City:** | **Zip:** |
| **Email:** | **Phone (home or cell):** | **Profession/Employer:** |
| **Race/Ethnicity (optional):** ▢ Asian ▢ Black/African American ▢ Pacific Islander  ▢ Hispanic ▢ White, Non-Hispanic ▢ Native American ▢ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Emergency Contact Person:** | **Relationship:** | **Phone:** |

**What is the highest level of education you have completed?**

▢ High School Diploma

▢ Associate’s Degree at a Technical School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Field: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

▢ Some College (year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Minor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

▢ 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

**Why do you want to become an adult literacy tutor?**

**Have you ever tutored anyone before (adult or child)? Please explain.**

**What type of learner are you interested in tutoring?**

▢ English Language Learner ▢ Reading ▢ Writing ▢ Math/GED ▢ Learning difference

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

**Learner Preference:** ▢ Male ▢ Female ▢ No Preference

**Do you have access to a car?** ▢Yes ▢ No

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

**Are you willing to tutor in person and/or online?** ▢In-person ▢ Online ▢ Both

**Do you have any of the following devices?**

▢Smartphone ▢Tablet ▢Computer ▢Laptop ▢Webcam ▢Microphone ▢Other: \_\_\_\_\_\_\_\_\_\_\_ ▢None

**Do you have easy access to an internet connection at home?** ▢ Yes ▢ No

**Are you able to tutor for at least 6 months and preferably a year?** ▢Yes ▢ No

**How often per week would you be willing to tutor? # days:** \_\_\_\_\_\_\_\_ **# hours:** \_\_\_\_\_\_\_\_

**Preferred Day(s) & Times for Tutoring:** *Please check all that are applicable.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Weekend** |
| 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

**If yes, please explain.**

**Have you received the vaccine for COVID?** ▢ Yes ▢ No ▢ Prefer not to answer

**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 two references that we can contact. At least one should be professional.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How did you hear about PCLC?**

**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 do my best to volunteer with PCLC for at least 6 months and preferably a year.

▢ I agree to meet with my learner in a public location. I will not give my learner rides to/from tutoring.

▢ I agree to treat my learner with respect and keep their private information confidential.

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

---------------------------------------------**Office Use Only** -------------------------------------------------------

**Learner Match:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Matched** \_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_