



# Learning Center Tutor Application

STUDENT NAME

SUBJECT YOU WISH TO TUTOR

## STUDENT INFORMATION

HAVE YOU TAKEN THIS CLASS BEFORE:    YES    NO    GRADE RECEIVED: \_\_\_\_\_

MAJOR: \_\_\_\_\_ GPA: \_\_\_\_\_ GPA (major): \_\_\_\_\_

LEVEL/YEAR:    Freshman    Sophomore    Junior    Senior    GRAD

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ID#: \_\_\_\_\_

AVAILABILITY (total hours per week): \_\_\_\_\_

## PREVIOUS EMPLOYMENT (begin with most recent)

COMPANY NAME: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

POSTION HELD (description): \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

POSTION HELD (description): \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

POSTION HELD (description): \_\_\_\_\_

**JOB RELATED INFORMATION** Please write down any special skills, awards, volunteer skills, or experience that you believe are relevant to this position. Please use a separate sheet of paper if necessary.

**QUESTIONS** Briefly answer the following questions. Please use a separate sheet of paper if necessary.

1. Why are you interested in this position and why do you feel that you would be a good choice?

2. What advice would you give to freshmen that would help them become successful students?

3. What is your definition of academic success?

## **SIGNATURE**

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

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*Signature*

*Date*

## **Employment Confidentiality Statement**

As an employee of the Learning Center, you may have access to confidential information such as grades, student records, test results, student progress in class, and similar data. You also may have verbal or written communication with your supervisor or instructor that should be kept confidential. To accept employment with any of the programs is to accept the responsibility to preserve the confidentiality of this information. Failure to adhere to these guidelines may result in termination of employment.

I have read the above employee confidentiality statement and understand and accept the responsibility to preserve the confidentiality of privileged information.

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*Signature*

*Date*

## **STATEMENT OF NON-DISCRIMINATION**

Biola University does not discriminate on the basis of race, color, national or ethnic origin, physical handicap, sex or age in any of its policies, practices or procedures. This non-discrimination compliance extends to employment as well as the educational programs and activities of the University.

*Biola University adheres to Sub-Section 504 of the Americans with Disabilities Act.*



Please Note: We will not accept recommendations from family members or friends/peers.

## TO BE COMPLETED BY APPLICANT

NAME: \_\_\_\_\_

ID #: \_\_\_\_\_

POSITION APPLYING FOR:

**TO BE COMPLETED BY:**    Faculty    RD/RA    Other: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ INSTITUTION: \_\_\_\_\_

1. In what capacity do you know the applicant? How much contact have you had with the applicant?

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2. Please assess the applicant based on each of the following traits. Please answer only when you feel qualified and add any comment you wish to make. (1 = low & 5 = high)

Knowledge of Content/Subject:	1	2	3	4	5
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	1	2	3	4	5
Communication Skills:					

	1	2	3	4	5
Sense of Responsibility:					

Friendliness and Tactfulness: 1 2 3 4 5

	1	2	3	4	5
Acceptance by Peers (i.e., social or relational skills:					

Sensitivity to the Problems and Situations of Others: 1 2 3 4 5

3. Please discuss specific concerns regarding this applicant (if any):

4. Additional comments (i.e., strengths and weaknesses):

5. Please check one:

I highly recommend this applicant for this position.

I recommend this applicant for this position.

I cannot recommend this applicant for this position.

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*Signature*

*Date*

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Please return the recommendation form via email, fax, or in a sealed envelope:

Biola Learning Center  
13800 Biola Ave.  
La Mirada, CA 90639  
(562) 906-4542  
(562) 906-4543 (fax)

[learning.center@biola.edu](mailto:learning.center@biola.edu)