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| Spelman CollegeStudent Success Program Peer T**utor Application** |

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| Name: |  |
| Major: |  |
| Spelman College Id (900#): |  |
| Local Address/Dorm: |  |
| Cell Phone # |  |
| Classification  |  |
| Spelman Email |  |
| GPA (in courses to be tutored) |  |
| List all courses that you are qualified to tutor: |  |
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| **PLEASE RESPOND TO THE FOLLOWING** |
| Is this your first time working as a General College employee? | Yes No |
| Submit two recommendation forms to be completed by the Department Chair and a faculty member; or two professors who have taught you in the courses to be tutored.  | Download Recommendation form: Recommendation1.docx |
| Submit a word processed one-page essay on “Why I Want To Be A Peer Tutor? | For your convenience, you may attach the essay here or email (fjackso8@spelman.edu).  |
| What time(s) are you available to assist in the Student Success Program? You must include an evening time as well.Day(s)/Time(s) Mon.-Thur./11:00 - 7:00By Appointment on Friday: 10:00 – 5:00 | Days(s): Time(s):  |
| Submit an unofficial copy of your transcript.  |  |
| I give permission for the release and display of a headshot picture for advertisement, etc. http://princess.spelman.edu/icons/ecblank.gif | http://princess.spelman.edu/icons/ecblank.gif |
| **AGREEMENT** |
| I have answered all questions to the best of my ability. I have agreed to work in the Student Success Program as a peer tutor for both semesters during the academic year of . By signing this agreement, I understand that I may be contacted during the summer via my Spelman email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Insert your Spelman email address.) Please type your name below and today's date to serve as your electronic signature.Name: Today's Date:  |
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