Tutor Application Form

Name (Please Print)________________________________ Academic Year_____

Local Address____________________________________

_________________________________________ Phone__________

E-Mail ___________@SJFC.edu

Major __________________

Cum GPA_______

Month/Year of Graduation __________________

Have you ever tutored/taught?  Yes____ No___

If so, describe____________________________________________________________

________________________________________________________________________

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<tr>
<th>Course(s) to tutor</th>
<th>Grade in Course</th>
<th>When Enrolled</th>
<th>Recommendation of Instructor (signature)</th>
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The number of hours per week available to tutor:_________________

NOTE: You must establish and use your SJFC e-mail account.

I agree to comply with the tutoring policies and procedures.

Signature______________________________ Date________________

Revised 3/10/06