

UNIVERSITY OF NORTHERN IOWA  
**STUDENT SUPPORT SERVICES**  
 Tutor Application

OFFICE USE ONLY	
Interviewer: _____	
Hired: <input type="checkbox"/> NO (please explain _____)	
<input type="checkbox"/> YES	Date Hired: ____ / ____ / ____
Employment Approval: <input type="checkbox"/> Departmental	
<input type="checkbox"/> Workstudy	
<input type="checkbox"/> HR	
Rate of Pay: \$ _____ per hour	
Course to be Tutored: _____	
Supervisor Approval: _____	
Date: ____ / ____ / ____	

PLEASE PRINT

Last Name			First Name			Middle			
Social Security Number ____ - ____ - ____				UNI Student ID Number					
Local Address				Permanent Address					
City		State	Zip Code		City		State	Zip Code	
area code (      )		Local Phone			area code (      )		Permanent Phone		
Cell Phone									
E-mail Address									
Classification <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate			Are you a transfer student? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, from where? _____		Are you a Graduate Assistant? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which department? _____				
Number of semesters at UNI _____			What is your major?			What is your minor?			
Number of credit hours you are taking this semester _____									
Do you have workstudy? <input type="checkbox"/> Yes (amount of grant: \$ _____ ) <input type="checkbox"/> No			Will you use workstudy for this position? <input type="checkbox"/> Yes <input type="checkbox"/> No Note: work study funds can only be used for one university position.			Major GPA		Overall Cum GPA	

*PLEASE CONTINUE*    ◆◆◆◆◆

List below the subject(s)/course(s) which you feel qualified to tutor (You must have at least a 3.0 GPA in the subject/course)		
Subject/Course	Instructor's Name	Grade Received in Course or GPA in Subject Area

Related experience (tutoring, teaching, counseling, etc.)		
Dates	Employer (Please include address)	Job Summary

Please provide three (3) references from faculty and/or former employers			
Name	Title	Address & Phone Number	What was your working relationship with this person?

*I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of my transcript and all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.*

***Your signature authorizes Student Support Services personnel to obtain a copy of your transcript for use in determining courses you are qualified to tutor.***

Student's Signature	Date
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*The University of Northern Iowa is an equal opportunity educator and employer with a comprehensive plan for affirmative action.*

**Student Support Services**  
 University of Northern Iowa  
 007 Innovative Teaching and Technology Center (ITT)  
 Cedar Falls, IA 50614-0388  
 (319) 273-2179

**STUDENT SUPPORT SERVICES**

**Tutor Availability Schedule**

Semester \_\_\_\_\_

Tutor Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

*(Place an X in the boxes for times you are NOT available.)*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7-8 a.m.							
8-9 a.m.							
9-10 a.m.							
10-11 a.m.							
11 a.m. -12 p.m.							
12-1 p.m.							
1-2 p.m.							
2-3 p.m.							
3-4 p.m.							
4-5 p.m.							
5-6 p.m.							
6-7 p.m.							
7-8 p.m.							
8-9 p.m.							
9-10 p.m.							
10-11 p.m.							

# STUDENT SUPPORT SERVICES

## TUTOR AGREEMENT

The goal of the Student Support Services Program is the development of skills in students which will aid them in becoming self-confident and independent learners. To help ensure that this goal is realized, the basic policies and expectations are clearly outlined. They are intended to give direction and organization to the tutoring staff as well as make our activities more professional. It is understood that all staff will work to develop and maintain a high level of credibility and respectability throughout the University community. Student Support Services tutors play a key role in the entire process and their competence and integrity are essential to the success of the Program.

### ACKNOWLEDGMENT OF PRIVACY ACT

In the course of my duties with Student Support Services at the University of Northern Iowa, I may have access to records containing individually identifiable information which is protected from unauthorized disclosure by the Privacy Act of 1974. I hereby acknowledge that I fully understand that the willful or intentional disclosure by me of this information to any unauthorized person could subject me to criminal and civil penalties imposed by law. I further acknowledge that such willful or intentional unauthorized disclosure is also against the policy of the program and the University of Northern Iowa and could constitute cause for my dismissal regardless of whether criminal or civil penalties are imposed.

I have read and understand the policies and expectations regarding tutor employment in the Student Support Services Program and agree to fulfill them to the best of my ability.

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Printed Name

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Signature

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Date