SACRAMENTO CITY COLLEGE
Learning Resources Division
Learning Skills and Tutoring Center

Payroll Completed: yes ☐ Volunteer ☐
HS 370 Completed: yes ☐ no ☐ waiver ☐

TUTOR APPLICATION Fall ____ Spring ____ Summer ____ Date _____

Name (print) _____ Student ID No. _____ Soc. Sec. No. _____
Last First

Address _____ City _____ ZIP _____

Phone _____ Alternate Phone (pager or cell) _____ Email _____

Major _____ GPA _____ Semester at SCC: 1st ___ 2nd ___ 3rd ___ 4th ___ 5th ___ 6th ___

Unit load this semester _____ Number of college units completed _____ Any college degree (s) yet? _____

Subjects you wish to tutor:	College courses you have taken that would support subjects you wish to tutor:	Grade received:	Instructor/College:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have any tutoring experience?_____

Have you completed any tutor training courses?_____ Are you available to work all semester?_____

Class Schedule: Include subject and room number. Use an "X" to indicate the times you are available to tutor.

	8:00	9:00	10:00	11:00	12:00	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00
Mon													
Tues													
Weds													
Thurs													
Fri													
Sat													