

Mentor Tutors Application Form

Hope United Methodist Church

Applicant information

Name: _____ Date of Birth: ____/____/____ Gender (Optional): ☐ Male ☐ Female

Address: _____

Cell Phone: _____ Home Phone: _____ e-mail: _____

Religious (Optional): _____ Best way to contact you: ☐ cell phone ☐ home phone ☐ e-mail

Subjects you can tutor

- | | | |
|------------------|-----------------|--------------------|
| 1. Subject _____ | Level (s) _____ | Regular/ Honor/ AP |
| 2. Subject _____ | Level (s) _____ | Regular/ Honor/ AP |
| 3. Subject _____ | Level (s) _____ | Regular/ Honor/ AP |
| 4. Subject _____ | Level (s) _____ | Regular/ Honor/ AP |

Academic Career

	Name	Year of Graduate	Major	Degree
High School:				
College 1:				
College 2:				
Graduate School:				
Certificate(s) / Credential(s):				

Mentor Tutors Use Only

Attachments: ☐ Certificate(s) ☐ Credential(s) ☐ Questionnaires ☐ Safety Gathering Completion

MT Director Recommendation: _____ Date: _____ sign: _____

MT Board Approval: _____ Date: _____ sign: _____

Questionnaires

Please briefly answer the following questions.

1. Why do you want to volunteer with Mentor Tutors?

2. What skills or talents will make you a good tutor for Homeless / Foster Teenagers?

3. Any medical conditions that we should be aware of?

4. How long can you commit yourself as a Mentor Tutor if you are invited?

Safe Tutoring Agreement

I agree to abide by the guidelines for contact with my tutee as set out by Mentor Tutors. I will never communicate with the student off-site during or after Mentor Tutors sessions.

Signature: _____ Date: _____

I will complete the Safe Gathering Training and follow all the guidelines provided by Mentor Tutors for Safe Tutoring.

Signature: _____ Date: _____

I certify that the above information is accurate and correct to the best of my knowledge.

Signature: _____ Date: _____