

MENTOR or TUTOR APPLICATION (please circle)

| Date: | | WSU ID: | | |
|---|--------------|------------------|---------------|-----|
| Name: | | _ | | |
| Address: | | | | |
| City/State/Zip Code: | | | | |
| Phone: | | Cell Phone: | | |
| Preferred Email: | | - | | |
| Undergraduate major & minor Graduate field of study | | | | |
| Number of credit hours enrolled th | nis semester | | | |
| If you are a mentor or tutor elsewhand how many hours | nere, where | | | |
| Describe your computer skills | | | | |
| Subject(s) you are qualified to tuto | or | | | |
| Are you eligible for work study? | □Yes □No | Are you a WSU er | nployee? □Yes | □No |

Preference is given to graduate students who hold a degree in the subject they will tutor. Interested undergraduate students must submit a written statement from a WSU-TC faculty member attesting to their knowledge of the subject area in which they wish to tutor.

| Please check time slots that you are AVAILABLE to tutor. | | | | | | | |
|--|--------|---------|-----------|----------|--------|----------|--------|
| Hours | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| 7-8:00 | | | | | | | |
| 8-9:00 | | | | | | | |
| 9-10:00 | | | | | | | |
| 10-11:00 | | | | | | | |
| 11-12:00 | | | | | | | |
| 12-1:00 | | | | | | | |
| 1-2:00 | | | | | | | |
| 2-3:00 | | | | | | | |
| 3-4:00 | | | | | | | |
| 4-5:00 | | | | | | | |
| 5-6:00 | | | | | | | |
| 6-7:00 | | | | | | | |
| Total | | | | | | | |
| Hours | | | | | | | |

| Honors, Activities, and Organizations: | | | | |
|--|--------------------------|-------------|----------------|--------------|
| Are you a past TRiO program participant? | | es 🗌 No | • | |
| If yes, circle program: Location: | EOC | ETS | SSS | UB |
| Years involved: | _ | | | |
| Related Experience: May include permanent, p | | | | |
| Respond to the questions below in the s personalized responses are important to | | | ch pages. Y | our concise, |
| Why are you applying to be a mentor or | tutor? | | | |
| Describe a key experience you have ha different from yourself. | d working with other | students, e | specially thos | e who are |
| 3. Why do you feel a peer mentoring or tut | oring program is imp | ortant? | | |
| 4. What unique issues or concerns do you | feel are typical of fire | t- and seco | ond-year colle | ge students? |
| 5. What do you feel you can offer to stude | nts as their mentor or | tutor? | | |
| | | | | |
| Applicant's Signature | Date | | | |