ALC - Advanced Learning Centers Tutor Application

		Date:		I	I
Name:					
Your Contact #s:					
1	Type:	home	cell	work	other
2					other
	Туре:	home	cell	work	other
3	Туре:	home	cell	work	other
4	Туре:	home	cell	work	
Email:					
Address:					
City:	State:		Zip	:	
Years at above address:					
If less than 3 years, please give previ	ous address:				
Previous Address:					
City:	State:		Zip	:	
Driver's License #:			Sta	te:	
If less than 3 years, please give previous	license info:				
Previous Driver's License #:		State:			
Are you a US Citizen?	If not.	status?	•		

Social Security #:	☐ I am eligible to work in the US I am not eligible to work in the ☐ US
Have you ever been arrested?	
If yes, please attach an extra sheet explanation	for
How did you hear about the job open	ning at ALC?
Have you heard about ALC before?	
What subjects/levels do you wish to	be considered for as a tutor?
Are you bilingual? (please list language)	s) and proficiency)
How many hours per week would yo	u prefer to tutor?
Approximately what days and hours	are you available for tutoring?
What geographic areas are you willing	ng to cover to provide tutoring?
Are you willing to tutor:	☐ In the student's home?☐ At the student's school?
	At a public location/library?

What is the highest level of education you have completed?				
What specific degrees, certifications, licens	es or other credentials			
do you hold as related to education/teaching?				
What practical experience do you have relat	ed to teaching?			
	-			
What skills do you bring that will supplemen	t our program?			
	•			
What is your first strategy when approaching a difficult student?				
<u> </u>				
List your top 3 qualities:	List 2 weaknesses:			

References Page

Please provide us with 3 or more references. These should be a combination of previous employers, teachers, and others who can speak of your character, experience, and work ethic.

ethic.	
Name:	Phone Number:
Relationship to Applicant:	
Name:	Phone Number:
Relationship to Applicant:	
Name:	Phone Number:
Relationship to Applicant:	
Name:	Phone Number:
Relationship to Applicant:	
Name:	Phone Number:
Relationship to Applicant:	
background check and to check refersioning below, the applicant hereby acknowledges that all the information correct to the best of his/her knowledges.	ne positions being offered, it is company policy to perform a crences on all applicants prior to commencing employment. By agrees to submit to these checks. The applicant also on provided to ALC - Advanced Learning Centers, Inc. is true and dge and belief. The applicant further understands that any on provided will constitute grounds for immediate termination of

APPLICANT PRINTED NAME

APPLICANT SIGNATURE

DATE