Tutoring Services
Minot State University

TUTOR APPLICATION

DATE: NAID: TERM:

NAME:

ADDRESS:

PHONE NUMBER: ALTERNATE PHONE:

EMAIL ADDRESS:

BEST TIMES TO CONTACT:

MAJOR OVERALL GPA

For which classes are you competent to tutor?

CRS	Course Title	Instructor(s)

List names, instructors (if MSU) and grades of classes you have taken that pertain to classes you=d like to tutor:

CRS	Course Title	Grade	Instructor(s)

Previous work experience/special skills or abilities you would like considered (as related to tutoring area):

List two on-campus references (faculty or staff) who can attest to your tutoring abilities.

1. NAME: _____ 2) NAME: _____
PHONE: _____ PHONE: _____

Please return this application to:

Evelyn Klimpel
Disabilities & Tutoring Coordinator
Lura Manor - Lower Level
Minot State University
500 University Avenue West
Minot, ND 58707

For additional information call: 701.858. 3371

Attention: W-4 forms must be completed before your paycheck can be issues!!!

DS ONLY

Date Hired: _____

Work History:	Semester	Comments
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
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