

Tutor Application



650.207.4728

😘 gaskintutor.com

I) Personal Infor	Tutor Application F	orm			
Name					
Address					
Home Phone	Cell	Phone			
Email Date of Birth					
Driver's License Social Security Number					
II) Education:					
	School Names and Locations	Major an	d Degree	Years Atten	ded
High School		xxxxxxxxxxxxxxx			
College					
Graduate					
III) Teaching an	nd Tutoring Experience:				
Dates			School	tice	
IV) Other Exper	rience:				
Dates	Job Description		Employer		

V) Subject areas. Please check one of the boxes on each line rating how you feel about tutoring the following subject areas:

1= not able 2 = willing to learn 3 = somewhat comfortable 4 = very comfortable

1= not :	able 2 = willing to learn 3 = some	wnat com			ortable
		1	2	3	4
Mathematics	•				
	Algebra				
	Geometry				
	Algebra II				
	Pre-Calculus				
	AP Calculus AB				
	AP Calculus BC				
	AP Statistics				
Science	Biology				
	AP Biology				
	Familiarity with Bio Labs				
	Chemistry				
	AP Chemistry				
	Familiarity with Chem Labs				
	Physics				
	AP Physics				
	Familiarity with Physics Labs				
	AP Environmental Science				
CS	Python				
	Java				
	Other:				
Test Prep	SAT I Mathematics				
10011100	SAT I Critical Reading				
	SSAT				
	ISEE				
	HSPT				
	Other:				
Collogo	Calculus				
College					
	Multi-Variable Calculus				
	Statistics				
	Chemistry	-			
	Organic Chemistry				
	Inorganic Chemistry	1			
Other	Homework Tutoring				
	Writing				
	College Application Essay				
	Specify Other Area:				

VI) Availability:	
How many appointments would you like to have per week?	
How far (time/distance) are you willing to travel between appointments?	

							4
					and families, e to commit to		apport and ne full year of
tutoring? ☐ Yes ☐ No							
Please che	eck the times					1=.	
before 3	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
3-7 pm							
7-10 pm							
VII) References. Please supply two references who have known you for several years and/or who have knowledge of your tutoring capabilities: A) Name							
					ears Known_		
Email							
B) Name_							
					ears Known_		
	Phone Alt Phone						
LIIIaII							
true and confalse state rejection of statements and organithat this apportant or written that before	omplete to the ment, or one of my applications from oplication and the other statements.	ne best of manission by mation or tending is application in liability for dother relations to the coskin Tutoring	ny knowledgine in the a mination of n and any a providing of ed documerontrary are log Services	pe. I unders pplication of my employ attachments or receiving this are not onereby express and have the may have the policy of the may have the policy of th	tand that any or interview pyment. I aut , and I release such information tracts of elessly disavo. Choice Screet	willful mis process will horize invese all person ation. I furth employmen wed. Finall	attachments is representation, ll be cause for estigation of all ns, companies, her understand t; and, that any y, I understand nother qualified

Signature

Date _____