

## **UNIVERSITY TUTORIAL SERVICES**

*Learning Assistance Programs and Student Support Services*

### **INFORMATION FOR LEARNING ASSISTANTS:**

1. **All Learning Assistants must have earned an “A” or “B” in all classes they wish to Tutor. Learning Assistants must also maintain a minimum cumulative GPA of 2.50 and a major GPA of 3.0** Grades will be verified. Appropriate departmental approval may also be required.
2. **Complete and read each section of this application in its entirety, with the exception of the Learning Assistant Reference Check Form, and return to University Tutorial Services, located in room 302 of the University Center.**
3. **Retrieve and read the Southeast MO State University Student Code of Conduct from [www6.semo.edu/judaffairs/code.html](http://www6.semo.edu/judaffairs/code.html)**
4. **Give the Learning Assistant Reference Check Form to an appropriate party along with the provided, campus mail marked envelope.** University Tutorial Services prefers that you, the applicant, choose a former instructor in the academic area for which you are applying to be your academic reference. Your chosen reference may fill out the Check Form and, using the provided envelope, return the completed form to University Tutorial Services through campus mail.
5. **Along with the completed Learning Assistant Application, please provide a complete Student Degree Audit, which is updated through your most recently completed semester.** This can be found either on the Southeast Portal under your student tab or from your academic advisor.
6. **Applications will not be reviewed until all required information has been provided to University Tutorial Services.** Once the application process is complete, your application will be reviewed by the University Tutorial Services staff. After review of said application a University Tutorial Services staff member will contact you via e-mail or phone to let you know of your application status.
7. Any questions or concerns should be directed to the Coordinator, Tutorial Services - Learning Assistance Programs, or Academic Specialist, Student Support Services. Both offices are located in the University Center, room 302: 573-651-2273, [lapdss@semo.edu](mailto:lapdss@semo.edu).

***Please keep this page for your records.***

# University Tutorial Services

## Learning Assistance Programs and Student Support Services

### *Employment Application*

**Personal Data:** (Please Print)

Name: \_\_\_\_\_  
(Last) (First) (MI)

Local Address \_\_\_\_\_  
(#/Apt/Street) (City) (State) (Zip)

Local Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Answering Machine? \_\_\_\_\_

Best Time To Call: \_\_\_\_\_

SE E-Mail: \_\_\_\_\_ Check Regularly? \_\_\_\_\_

Birth Date: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Tutor Position Applied For: (Specific Subject/s) \_\_\_\_\_

**Academic Data:** (Please Print)

**Classification:** Freshman ( ) Sophomore ( ) Junior ( ) Senior ( )

Graduate Student ( ) College credits as of last term: \_\_\_\_\_

**Major:** \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ GPA (Major): \_\_\_\_\_

**EDUCATIONAL BACKGROUND:**

High School: \_\_\_\_\_  
(Name) (Location)

Other Colleges Attended:

\_\_\_\_\_  
(Name) (Location)

**I AM INTERESTED IN TUTORING STUDENTS IN THE FOLLOWING COURSES:**

Class (course number and name)	Grade	Department Approval (office only)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**EMPLOYMENT HISTORY:**

Presently working in another department on campus? Yes\_\_\_\_\_ No\_\_\_\_\_

If Yes, list the Department(s):

1. \_\_\_\_\_

2. \_\_\_\_\_

If employed in another department, how are you paid?

Monthly ( )

Bi-Monthly ( )

Graduate Asst ( )

**Previous Tutoring Experiences:** (list subject matter, dates, department/employer)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Anticipated involvement in campus/work activities next term:** (includes hobbies, clubs, organizations, part-time employment, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Honor Societies, professional memberships, honors/awards:** (list membership & offices held)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Academic References:**

(Name)	(Address)
(Phone)	(Relationship)
(Name)	(Address)
(Phone)	(Relationship)

*I hereby attest that all the information stated in this application to be truthful and accurate.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_





