



STUDENT APPLICATION FOR TUTOR

Date: _____

Name: _____

Address: _____
City State Zip

Phone #: _____ (Cell) _____ (Work)

Best time to call you: _____

E-mail: _____

Birth Date: ___/___/___ Gender: Male Female Program: IEP DOE Wait List

Would you be interested in a Language Exchange? _____

To assist in pairing tutors and learners, please complete the following:

Check all the locations where you could meet your tutor:

Northampton Amherst Holyoke Other _____

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-----------------|--------|---------|-----------|----------|--------|----------|--------|
| Times Available | | | | | | | |

Please write your work schedule: _____

The following is information to help us match you with a tutor:

Departure date (if applicable): _____

What country are you from? _____ Native Language/s _____

What are your hobbies? _____

What do you hope to learn from your tutor? _____

Please give this form to your ESOL instructor, Thank you!

Teacher's Name: _____ Student's Level: _____

Instructor's Comments: _____