

Volunteer Tutor Application



Please Return To:
Tutor Coordinator
 Oregon Coast Community College
 400 SE College Way Newport, OR 97366
 Or e-mail to tutoring.center@oregoncoastcc.org

 phone: (541) 867-8502

Name: _____
 Address: _____
 City/Zip: _____
 Phone: _____
 Email: _____

Education (circle one)
 High School/GED _____
 College **1** **2** **3** **4**
 Graduate **1** **2** **3** **4**
 College Major: _____

How did you hear about us? _____
 Have you tutored/taught before? If so, where? _____
 Do you have any additional education/training? _____
 Present employer and description of work: _____
 Previous employment experience: _____

Tell us why you want to tutor, and a little about yourself. If you need more space attach another sheet of paper.

 Have you ever been convicted of a felony? Y/N Please explain: _____

Time(s) Available:

	Monday	Tuesday	Wednesday	Thursday	Friday	Sat/Sun
Morning						
Afternoon						
Evening						
DETAILS:						

Preferred Assignment:
 One to one _____
 Small Group _____
 Classroom Aide _____
 No Preference _____

What Subjects would you like to tutor?
 ABE/Literacy _____ GED Prep _____
 ESOL _____ Math _____
 Other (please specify) _____

Which OCCC location would you prefer to tutor at?

 Newport

 Lincoln City

Signature: _____ Date: _____