Foreign Languages SAAB Tutor Application 2013-14

Name:_____ _____ Student ID #:_____
(first) (last)

Email Address:_____@lclark.edu

Major:_____ Anticipated Date of Graduation:_____ ☐ Fall ☐ Spring
(year)

Country of Origin:_____ Relevant Past Countries of Residence:_____

Years of Exposure to the Language in which you wish to tutor:_____

I, the undersigned applicant, declare all information on this form to be honest and accurate to the best of my knowledge, and will timely inform the Director of Tutoring programs should any of the information change.

Signed, _____ _____
(date)

Course Authorization:

Record each course in which you would like to tutor here. To tutor for a course, you must have satisfactorily completed the course yourself. You must also obtain the consent of the instructor who taught the course to you, or, in their absense, the departmental head. Exception: AES Tutors need not have completed the course in which they tutor, and must always recieve consent of the departmental head.

To Faculty: By signing, you declare that you believe this student to have the knowledge and ability to tutor the courses for which you sign.

☐ Please check here if you already tutor for courses and wish to add the below.

Course Code	Course Title	Instructor	Instructor's Signature
ITAL 101	EXAMPLE	JOHN HANCOCK	John Hancock

Please return this application to the Maarit Reed in the Foreign Languages Department. Her office is located in Miller 313.