

This form is for Foreign Language Tutors ONLY. Thank you.

SAAB Tutor Application 2008-09 for Foreign Language Tutors

Name (print) _____ Date _____

Email _____ MSC _____ Phone _____

Country of Origin: _____ Countries in which you resided: _____

Years of exposure to the language(s) you wish to tutor: _____

Anticipated date of graduation/leaving LC _____ Year you first started tutoring: _____
(month) (year)

Do you anticipate participating in an off-campus program this year? If so, which semester(s)?

I declare all information on this form to be honest and accurate to my knowledge.
Signature: _____

To Faculty: By signing, you recommend this person as a SAAB tutor. He or she displays the knowledge and ability for the courses listed below.

Language	Level	Special Notes	Approving Faculty	Signature

Tutors: You must complete a training session before beginning tutoring. Please submit this application as soon as possible so that you can attend a training session and then start working.

Please return this application to **Maarit Reed**, Administrative Coordinator for Foreign Languages on the 3rd floor of Miller.

Feel free to contact the Tutoring Director with any questions.

Leah Scott-Zechlin
SAAB Tutoring Director
<http://www.lclark.edu/org/aslc/tutoring.html>
tutoring@lclark.edu MSC 1423