

## ***Math Learning Center Tutor Application***

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

Phone: \_\_\_\_\_ UID: \_\_\_\_\_

Campus Email Address: \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

Campus or Local Address: \_\_\_\_\_

Classification:

Fr.    Soph.    Jr.    Sr.    Graduate Student    Post-Baccalaureate

Major: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Expected date of graduation (month/year): \_\_\_\_\_

Credit Hours Earned at Wright State University: \_\_\_\_\_

Number of hours available to work: \_\_\_\_\_

Have you ever worked on campus?                      Yes                      No

Do you have Federal Work Study?                      Yes                      No

Are you currently employed at Wright State?    Yes                      No

References: Please include the name, title, phone number, and email address of at least two people, **not** personal (no friends or family), who can describe your academic and/or employee skills. At least one reference must be academic and attest to your mathematical ability.

Name:	Phone:
Title:	Email:
Name:	Phone:
Title:	Email:

