

**Clayton State University
AmeriCorps Tutorial Program**

SPECIFIC QUALIFICATIONS

Have you ever worked/volunteered as a tutor? Yes No-- If yes, When? _____

Have you ever worked/volunteered with high school students? Yes No-- If yes, When? _____

Have you ever worked/volunteered with disadvantaged, underserved populations? Yes No-- If yes, When? _____

Please indicate your capability in subjects in which you are interested in tutoring
1 = Minimal Capability 3 = Some Capability 5 = Strong Capability

<input type="checkbox"/> Algebra I	<input type="checkbox"/> Fundamental Math Skills	<input type="checkbox"/> Language Arts
<input type="checkbox"/> Algebra II	<input type="checkbox"/> Environmental Science	<input type="checkbox"/> Reading Comprehension
<input type="checkbox"/> Geometry	<input type="checkbox"/> Biology	<input type="checkbox"/> Literary Analysis
<input type="checkbox"/> Pre-Calculus	<input type="checkbox"/> Chemistry	<input type="checkbox"/> Conventions and Writing
<input type="checkbox"/> Calculus	<input type="checkbox"/> Energy Transformation	<input type="checkbox"/> Writing Content/Organization
<input type="checkbox"/> SAT/GHGT Prep	<input type="checkbox"/> Ecology	<input type="checkbox"/> Sentence Formation

(Verbal or Math-- Circle One)

Have you previously served in AmeriCorps? Yes No—If yes, When and with what program? _____

Did you complete your term of service? Yes No

Do you have reliable transportation? Yes No *(This position will require you to commute to Jonesboro or Morrow high schools to tutor and to some volunteer projects throughout the year).*

EMPLOYMENT HISTORY

(Please list current or most recent employer first)

Employer: _____ Supervisor: _____
Position Held: _____ From _____ To _____
Position Description: _____

May we contact? Yes No Phone: _____

Employer: _____ Supervisor: _____
Position Held: _____ From _____ To _____
Position Description: _____

May we contact? Yes No Phone: _____

Employer: _____ Supervisor: _____

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Clayton State University Background Investigations Consent

I, _____, hereby authorize **Clayton State University** and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment.

I release **Clayton State University** and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name Printed

*Date of Birth Social Security Number *Maiden Name or Other Names Used

Please list all Residence Addresses for the past Seven Years-Use a Separate Sheet if needed:

Present Residential Address How Long?

City/State Zip

Former Address #1 How Long?

City/State Zip

Former Address #2 How Long?

City/State Zip

Former Address #3 How Long?

City/State Zip

Signature Date*NOTE:

The above information is required for identification purposes only, and is in no manner used as qualifications for employment **Clayton State University** is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age (40 and over), Handicap or National Origin.