**Peer Writing Tutor Application CHECKLIST**

🞎 *Completed* Peer Tutor Application

🞎 Recommendation Form 1 in sealed envelope

🞎 3-5 page writing sample

**Please submit all materials to The Writing Center -  
Helen T. Chick, 216-B.**

If you have any questions, contact Monica Torres at   
(910) 672-2456 or mtorres7@uncfsu.edu.

**Peer Writing Tutor Application**  
*Please type or print neatly*

*Section 1: Personal and Academic Information*

|  |  |
| --- | --- |
| Full Name (*First, MI, Last)* | Banner ID # |
| Permanent Address (Including Zip Code) | |
| Permanent Phone # | FSU E-mail address |
| What is your classification?  🞎 Freshman 🞎Sophomore 🞎 Junior 🞎 Senior 🞎 Other | |
| Academic Intended Major | Academic Intended Minor (if applicable) |

Section II: Employment History

Please list the last three positions you have held, beginning with the most recent.

|  |  |  |
| --- | --- | --- |
| **Employer** | **Dates of Employment** | **Positions/Responsibilities** |
|  |  |  |
|  |  |  |
|  |  |  |

Section III: References

Please list the names, email addresses, and phone numbers of individuals who can be contacted for a recommendation.

|  |  |  |
| --- | --- | --- |
| **Name** | **Email Address** | **Phone #** |
|  |  |  |
|  |  |  |

Section IV: Questions *(attach a separate sheet if necessary)*

**1) Please describe any formal tutoring experience you have had. If you have never tutored before, what is your experience working with other students or helping others?**

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| --- |
|  |

**2) As a potential Peer Writing Tutor, what are two important qualities you have that would support your performance in this position? Explain how.**

|  |
| --- |
|  |

**3) Please list and explain any/all activities/clubs/jobs/obligations you may have this semester in addition to working with The Writing Center.**

|  |
| --- |
|  |

**4) What is it about writing that makes it so challenging for some students?**

|  |
| --- |
|  |

**5) A student comes into The Writing Center and has no idea what her instructor wants her to do on her upcoming assignment. She comes in flustered and upset. How would you handle this student and her situation?**

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|  |

***With my signature below, I affirm that 1) I have read and understand the requirements and responsibilities of a Peer Writing Tutor; and 2) All of the information provided here is complete and accurate***

|  |  |
| --- | --- |
|  |  |

Signature Date

**Peer Writing Tutor Application – Recommendation Form 1**  
*Please type or print neatly*

**To the student:** *Complete Section I of this form and submit it to an individual qualified to evaluate your potential as a Peer Writing Tutor. After completing the form, the individual should email the form to Monica Torres at mtorres7@uncfsu.edu.*

*Section I:*Student Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I 🞎 waive / 🞎 do not waive my right to review this document.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To the individual completing this form:** *The above named student has applied for a position with The Writing Center. Please complete the following evaluation of his or her potential to serve effectively as Peer Writing Tutor.*

How long have you known this student? \_\_\_\_\_\_ In what capacity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has this student completed a course you taught? \_\_\_\_Yes \_\_\_\_No

If “yes,” what was the course and final grade? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please evaluate the student on each of the following characteristics:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Poor** | **Fair** | **Good** | **Excellent** | **Not Observed** |
| **Academic Ability** |  |  |  |  |  |
| **Dependability** |  |  |  |  |  |
| **Maturity** |  |  |  |  |  |
| **Communication Skills** |  |  |  |  |  |
| **Ability to work with others** |  |  |  |  |  |
| **Overall evaluation** |  |  |  |  |  |

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form to Monica Torres at mtorres7@uncfsu.edu.

If you have any questions, feel free to call 910-672-2456.