

The Tutoring Center of Chicago Temple

77 W. Washington St.

Chicago 60602

www.chicagotemple.org 312-236-4548 Fax: 312-236-4106

**TUTOR VOLUNTEER APPLICATION FOR
THE TUTORING CENTER OF CHICAGO TEMPLE**

Wednesdays, 5-6pm during the school year

At Chicago Temple

PERSONAL INFORMATION

Date of Application: _____

Your Name: _____
First Last

Address: _____
Street Unit/Apt #

City State Zip

Phone Numbers/include area code: (Home) _____

(Cell) _____

(Work) _____

Email (Print legibly) _____

Emergency Contact: Name _____

Relationship: _____

Day Phone _____

Evening Phone _____

Cell Phone _____

**Tutors are responsible to arrive at 4:50 and finish at 6pm. The program runs most
Wednesdays during the week. Can you meet this obligation?** _____

EDUCATION

Provide the following for each school attended: Address, City, State, Zip

Graduate Degree/Certif./Diploma
or no. yrs. attended

High School _____

College _____

Graduate School _____

Other Training: _____

What other skills, talents, travel, experiences, other volunteer programs, license, or foreign language do you have that will add to the Tutoring Center program for the students?

EMPLOYMENT HISTORY

Please list the current if applicable and the last three employments held. If retired, please provide information on your background and retirement/work history.

1. Employer _____ From _____ To _____

Address and Phone _____

2. Employer _____ From _____ To _____

Address and Phone _____

3. Employer _____ From _____ To _____

Address and Phone _____

REFERENCES

List three references, not related to you, who have knowledge of your professional and/or personal qualities. Please fill in all information. Your references will be contacted.

1. Name _____ Relationship _____

Business if appl./Address and Phone

2. Name _____ Relationship _____

Business if appl./Address and Phone

3. Name _____ Relationship _____

Business if appl./Address and Phone

PERSONAL DATA AND ACKNOWLEDGEMENTS

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, in the past seven years which has not been annulled or expunged by a court?

Circle: YES NO

If yes, attach an additional sheet explaining circumstances. A conviction is not an automatic bar to volunteering unless the conviction involves abuse of any form.

To determine my qualifications as a volunteer, I authorize First United Methodist Church at Chicago Temple and the Chicago Public Schools to send or call references and to conduct an investigation of my application. I further authorize Chicago Temple and Chicago Public School to conduct all criminal and civil background checks as may be required by State law. I understand that any false or misleading information furnished by me on this application form or in connection with my application may result in rejection of this application and my consideration for a volunteer position.

I understand that this application does not represent an offer or contract with a volunteer position. I understand that volunteering with the Tutoring Center of Chicago Temple is “at will” and that no volunteer position guarantee exists.

Signature

Date

E-mail, Fax, or mail this application to the following. You will be contacted when the references have been checked to meet with Dr. Magrini for a personal interview.

Rev. Dr. Cheryl Magrini
The Tutoring Center at Chicago Temple
tutoring.chicagotemple@gmail.com

Mail: Rev. Dr. Cheryl Magrini
The Tutoring Center at Chicago Temple
77 W. Washington St. 2nd fl.
Chicago, IL 60602

Fax: 312-236-4106 Att. Dr. Magrini

May, 2010