



Student Support Services Peer Tutor Application

Qualifications:

- **Must be currently registered at Adams State College as an undergraduate.**
- **Must serve as a model (academically, promptness, dedication) for students.**
- **Must be committed to helping students learn how to become independent and effective learners.**
- **Must have earned a 3.0 or higher for each course that will be tutored, and must maintain an overall 2.5 or higher GPA.**
- **Must provide recommendations from faculty, especially those in courses that will be tutored.**

Responsibilities:

- **Attend tutor trainings, meetings, and workshops set by Tutor Coordinator.**
- **Meet with student(s) on a one-to-one or small group basis to give learning assistance.**
- **Visit class(es) you are tutoring and make contact with the instructor at least once to obtain any necessary course syllabi or materials.**
- **Document tutorial objectives, activities, and materials needed.**
- **Establish an organized study plan for student(s) assigned.**
- **Maintain appropriate and professional behavior at all times.**
- **Maintain exact records of times and dates worked (for pay verification).**

**Student Support Services
Adams State College
Petteys Hall #1
(719) 587-7632**



Student Support Services Peer Tutor Application

Name: _____

Student ID: _____

SSN: _____

Local Address:

Box #/Address	City	State	Zip
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Local Phone Number: () _____ - _____ Primary e-mail address: _____

Permanent Address:

Box #/Address	City	State	Zip
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College Level (check one):

Freshman (0-29 credits) Sophomore (30-59 credits) Junior (60-89 credits) Senior (90 + credits)

College Major: _____ Minor: _____

Please list two references:

Name: _____ Phone Number: () _____ - _____

Name: _____ Phone Number: () _____ - _____

Have you ever worked as a peer tutor before? Yes No If yes, please give dates of employment:

Courses (name & number) you have taken and can tutor, in order of preference:

Courses:	Semester/Year:	Grade:	Instructor:
Sociology 201	Fall 2008	4.0	Dr. Moore
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Preferred Office Hours (times can be between 8am-8pm/may be up to 20 hours):

Monday: _____ Tuesday: _____ Wednesday: _____

Thursday: _____ Friday: _____ Total Hours: _____

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I certify that the information on this form is correct and complete to the best of my knowledge.
I hereby grant permission to Student Support Services to secure any necessary information
that relates to my participation as a peer-tutor (e.g. financial data, test scores, transcripts, etc.).

Signature of Tutor: _____ Date: _____