



TUTORING • ADVOCACY • PROFESSIONAL DEVELOPMENT

Application for Contract Tutors

Name: _____

Address: _____

Contact Phone Number: _____

Email Address: _____

Educational Background

Undergraduate:

College/ University	Major	Degree

Graduate:

College/ University	Major	Degree

Orton-Gillingham Training:

Dates: _____

Level: _____

Relevant Experience

Teaching Certificate:

Area of Certification: _____

Issuing State: _____

Date Issued: _____

Teaching Experience:

School: _____

Address: _____

Dates: _____

Grade: _____

Supervisor: _____

School: _____

Address: _____

Dates: _____

Grade: _____

Supervisor: _____

Tutoring Experience:

Briefly describe any tutoring experience you have had.

References

Please provide the names and contact information for two references – one must be a professional relationship (ex., former employer).

Name	Relationship	Position	Email	Telephone
1.				
2.				

Please attach a copy of your resume, scan, and return to Kelly@TAPlearningservices.com, and kek1270@gmail.com