



Parkland Adult Literacy **Volunteer Tutor Registration Form**

Name: _____ **Date:** _____

Address (Mailing): _____

Town/City: _____ **Postal Code:** _____

Telephone (H): _____ **(W):** _____

Email: _____

Age Category:

19 20 – 35 36 – 55 56+

Education:

Last school attended: _____

Completed grade: _____

Other schooling: _____

Work Experience:

What is your present occupation? _____

What is your previous work experience?

Language

First Language: _____ Other languages spoken: _____

Are you a: New Tutor Returning Tutor

As a volunteer tutor do you prefer:

Basic literacy students ESL students Special need students

Tutoring preference:

Male Female Does Not Matter

Parkland Adult Literacy
Volunteer Tutor Registration Form - Continued

Reason for volunteering:

Please explain your reasons for volunteering with adult learners.

Tutoring with adults involves building relationships with learners so they feel safe in their learning environment. Once you have been matched with a learner, would you be willing to commit to working with him/her for a minimum of 6 months? Yes No

List any teaching/ coaching/ tutoring experience:

Available to meet:

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

References:

Name	Phone Number	Reference Check – Date and Comments
1.		
2.		