



Tutor Application

Mrs. Leger's Littles · Southern New Hampshire

APPLICANT INFORMATION

Full Name

Date

Address

Phone

Email Address

Date Available

Social Security No.

Are you a U.S. citizen? ☐ Yes ☐ No If no, authorized to work in U.S.? ☐ Yes ☐ No

Previously worked for this company? ☐ Yes ☐ No If yes, when: _____

EDUCATION

High School

Address

From

To

Did you graduate?

☐ Yes ☐ No

College

Address

From

To

Did you graduate?

Degree

☐ Yes ☐ No

Other

Address

From

To

Did you graduate?

Degree

☐ Yes ☐ No

If there are additional schools, please include on a separate sheet of paper.



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REFERENCES

Please list three professional references.

Full Name

Relationship

Company

Phone

Address

Full Name

Relationship

Company

Phone

Address

Full Name

Relationship

Company

Phone

Address

PREVIOUS EMPLOYMENT

Company

Phone

Address

Supervisor

Job Title



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Responsibilities

From

To

Reason for Leaving

May we contact your previous supervisor? ☐ Yes ☐ No

If no, please explain

Company

Phone

Address

Supervisor

Job Title

Responsibilities

From

To

Reason for Leaving

May we contact your previous supervisor? ☐ Yes ☐ No

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Company

Phone

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Supervisor

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Responsibilities

From

To

Reason for Leaving

May we contact your previous supervisor? ☐ Yes ☐ No

If no, please explain

If there are further positions, please include on a separate sheet of paper.

CERTIFICATIONS & SKILLS

Current Teaching License: ☐ Yes ☐ No

State

Certificate #

Endorsement(s)

Infant / Child CPR: ☐ Yes ☐ No

Orton-Gillingham Trained: ☐ Yes ☐ No

Applicable Degrees (please specify)

Other Certifications / Skills (please list)

DISCLAIMER & SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date

Along with this application, please submit two professional letters of reference and a copy of your current teaching license.