



**STUDENT LEARNING CENTER
EDUCATIONAL OPPORTUNITY PROGRAM
CALIFORNIA STATE UNIVERSITY, CHICO**

INSTRUCTIONAL SUPPORT ASSISTANT (ISA) – Unit 11

- Position:** **Tutors for Fall and Spring Semesters for all subject areas.**
Approximately 5-10 hours per week.
- Job Description:** Under the direct supervision of the Student Learning Center Coordinator, the tutor will provide individual and small group tutoring in assigned subject area(s) and provide additional tutorial support for Educational Opportunity Program students as needed. The tutor will identify problems and relate this information to his/her supervisor. In addition, tutors must be prepared to complete 10-15 hours of training during each semester of employment.
- Qualifications:** Applicants should be junior or senior standing, have a minimum of a 2.8 GPA, and have excellent communication skills. Undergraduates must be enrolled in a minimum of 6 units; graduate students 3 units. Applicants should be sensitive to the experience of students with disabilities and students from low-income, academically disadvantaged, and ethnically diverse backgrounds. Ongoing participation in training sessions is required for employment.
- Hourly Rate:** \$10.00 per hour.
- Selection Procedure:** Tutors will be selected on the basis of an evaluation of information obtained from the following sources: 1) completed application forms, 2) transcript, 3) interview, and 4) instructor's recommendation for each tutoring subject.
- Application Deadline:** Applications will be accepted until all positions are filled. Interviews will be scheduled based on positions available. Applications are available at the Student Learning Center, SSC 340 or online at www.csuchico.edu/slc.
- Submit to:** Christine Connerly, Student Learning Center Coordinator
Student Learning Center, (530) 898-6839
Student Services Center, Room 340
cconnerly@csuchico.edu

THIS PROGRAM AND POSITIONS ARE CONTINGENT UPON FUNDING.

CALIFORNIA STATE UNIVERSITY, CHICO IS AN AFFIRMATIVE ACTION/EQUAL EMPLOYMENT OPPORTUNITY/AMERICANS WITH DISABILITIES ACT/VETERAN EMPLOYER.



INSTRUCTIONAL STUDENT ASSISTANT APPLICATION FOR EMPLOYMENT

California State University, Chico
Office of the Vice Provost for Human Resources
Chico, California 95929-0024
Voice 530-898-5029 TDD 530-898-5870

Position Title:

Department:

To comply with the immigration Reform and Control Act of 1986, all new employees must provide proof of identity and authorization to work.

Name: Last, First, Middle Initial – as it appears on your Social Security Card Previous name(s) used, if different

Mailing Address: Post Office Box or Number and Street City, State, and Zip

() () ()

Home Phone Number Work Phone Number Message Phone Number

EDUCATION (NOTE: unofficial transcripts **must** accompany application)
Highest degree received and date of receipt:

Earned	Name of School	Major	Diploma/Degree

Professional Schools or Licenses and Certificates:

Other Educational Information:

WORK AUTHORIZATION
California State University, Chico only employs individuals legally authorized to work in the United States. Should you be offered a position on this campus would you be able to furnish proof that you are authorized to work? NO YES If 'no,' explain.
Are you over the age of 18? NO YES If not, are you able to furnish a work permit indicating right to work? NO YES

Have you ever been convicted of a crime as an adult (excluding non-felony traffic violations)? NO YES A conviction includes a plea, verdict or finding of guilt, regardless of whether a sentence was imposed by the court. You need not provide information about marijuana possession convictions or a violation of Health and Safety Code Section 11357(b) or (c), Section 11360(c), or Section 11364, 11365, or 11550 that occurred more than two years ago. (NOTE: A conviction will not necessarily disqualify an applicant from employment) If 'yes,' explain:

Have you been arrested for any criminal offense for which you are out on bail or on your own recognizance while a trial is pending. (Note: this information cannot be used as a basis to deny employment, unless you are convicted). NO YES If 'yes,' explain:

The position for which you have applied may require the use of a state vehicle for state business. If you are offered and accept a position can you furnish proof of a valid California driver's license? NO YES If 'no', explain:

EMPLOYMENT HISTORY

Account for past work experience and describe specific duties that are relevant to the position for which you are applying. **To allow for accurate review and consideration, your application should provide a complete and detailed description of your work experience.** It is to your benefit to be as thorough as possible because this information will be used to determine if you are qualified for this position. You may attach an additional page if more space is required or refer to a résumé only for the duties description.

FROM (mo/yr)	TO (mo/yr)	JOB TITLE or OCCUPATION: Part time <input type="checkbox"/> Full time <input type="checkbox"/>	NAME OF YOUR DIRECT SUPERVISOR
EMPLOYER'S NAME and ADDRESS:			SUPERVISOR'S PHONE NUMBER ()
DESCRIPTION OF DUTIES:			
REASON FOR LEAVING:			

FROM (mo/yr)	TO (mo/yr)	JOB TITLE or OCCUPATION: Part time <input type="checkbox"/> Full time <input type="checkbox"/>	NAME OF YOUR DIRECT SUPERVISOR
EMPLOYER'S NAME and ADDRESS:			SUPERVISOR'S PHONE NUMBER ()
DESCRIPTION OF DUTIES:			
REASON FOR LEAVING:			

FROM (mo/yr)	TO (mo/yr)	JOB TITLE or OCCUPATION: Part time <input type="checkbox"/> Full time <input type="checkbox"/>	NAME OF YOUR DIRECT SUPERVISOR
EMPLOYER'S NAME and ADDRESS:			SUPERVISOR'S PHONE NUMBER ()
DESCRIPTION OF DUTIES:			
REASON FOR LEAVING:			

FROM (mo/yr)	TO (mo/yr)	JOB TITLE or OCCUPATION: Part time <input type="checkbox"/> Full time <input type="checkbox"/>	NAME OF YOUR DIRECT SUPERVISOR
EMPLOYER'S NAME and ADDRESS:			SUPERVISOR'S PHONE NUMBER ()
DESCRIPTION OF DUTIES:			
REASON FOR LEAVING:			

EMPLOYMENT/EDUCATION INFORMATION RELEASE AUTHORIZATION

As an applicant for a position with California State University, Chico I do hereby authorize all past and present employers, references, institutions of higher education and other appropriate persons or agencies to release to the University any and all information regarding my employment/education upon request. I do hereby agree to hold such employers, institutions, references, persons, etc. harmless from liability for releasing said information.

SIGNATURE must be original

DATE

APPLICANT CERTIFICATION

I certify that the answers I have given in the materials I have submitted in application for this position are true and correct and that I have not knowingly withheld any facts or circumstances. I understand that all answers given in my application for employment are subject to verification and that should I be employed at the campus, any misrepresentation or omission of facts in this application may be sufficient reason for dismissal. The application materials include this document and any other materials submitted.

SIGNATURE must be original

DATE

SUPPLEMENTAL APPLICATION
Instructional Support Assistant (ISA) - Unit 11
TUTORIAL PROGRAM
STUDENT LEARNING CENTER
Student Services Center, Room 340
(530) 898-6839
CALIFORNIA STATE UNIVERSITY, CHICO

Please print: Date _____

Name: _____ Student I.D.: _____

Anticipated Graduation Date: _____ Year in School: _____ Current GPA: _____

Major: _____ Minor: _____

E-mail address: _____ Cell phone: _____

1. What subjects do you feel capable to tutor (please be **specific** as to course numbers)?

2. Why do you want to be a tutor?

3. What previous formal or informal experience do you have that would help make you a successful tutor?

5. How would you describe the responsibilities of a tutor?

UNOFFICIAL TRANSCRIPTS:
Please provide a copy of your CSU Chico Unofficial Transcripts to the Student Learning Center with your application.

**Student Learning Center
Student Services Center, Room 340
530-898-6839
Faculty Recommendation for Tutors**

Dear Faculty Member:

The Student Learning Center offers all students tutorial assistance in a variety of subjects. To provide effective service, we are continually seeking qualified tutors. However, before considering a student as a tutor, we require at least a “B” grade or better in the subject they will tutor and a faculty member’s evaluation of the student’s qualifications. Please include as much information about this student as you consider necessary. Final consideration will be based upon the student’s written application, transcripts, interview and faculty’s recommendation. We greatly appreciate your help in evaluating this prospective tutor. Thank you.

STUDENT’S NAME: _____

COURSES TAKEN FROM YOU: _____

How complete is this student’s knowledge of the course material?

Excellent _____ Good _____ Adequate _____ Inadequate _____

Do you think this student can clearly explain concepts to others?

Yes _____ No _____ Unknown _____

Do you recommend this student as a tutor?

Yes _____ No _____

If yes, please list specific course numbers you feel this student is competent in:

Additional Comments:

Print Name: _____

Signature: _____ Date: _____

Position: _____ Phone: _____

Department: _____

Please return this form to: Christine Connerly, SLC Coordinator at the Student Learning Center through intercampus mail, Zip 183 (email recommendations also accepted: cconnerly@csuchico.edu). Thank you for your prompt response.