



WRITING CENTER

Student Learning Center, SSC 340
California State University, Chico

INSTRUCTIONAL SUPPORT ASSISTANT (ISA) – Unit 11

Position:

Writing Tutors for Fall 2024

Application Deadline: Open Until Filled

Estimated Salary: \$17.01 - \$21.62 per hour

Location Type: On-site (in-person and Zoom tutoring sessions)

Job Description:

Under the direct supervision of the Writing Center Coordinator, the writing tutor will help students understand the writing process and provide them with skills to improve their writing. Tutors must be prepared to complete at least 10-15 hours of training during each semester of employment and approximately 8-10 hours of work per week during the semester. Additionally, tutors are to attend bi-weekly meetings which will be held on Fridays at 3pm. Tutors may also be asked to lead writing-related workshops.

Qualifications:

Applicants of *junior, senior, or graduate standing* preferred, have a minimum of 2.8 GPA, and have excellent communication skills. Undergraduates must be enrolled in a minimum of 6 units; graduate students 4 grad-level units. Applicants should be sensitive to the experience of students from low-income, academically disadvantaged, and ethnically diverse backgrounds. Ongoing participation in training sessions is required for employment. *Exceptions to the minimum eligibility qualifications may be granted at the sole discretion of the University.*

Selection Procedure:

Tutors will be selected on the basis of an evaluation of information obtained from the following sources and the interview.

- Completed application
- Unofficial transcripts
- Instructor's recommendation
- At least 4 pages of an academic writing sample
- Feedback to sample student essay (this will be emailed to applicants after applications have been reviewed)

To Apply:

Applicants may find and submit applications on [Handshake](#). Or, Applications can be found on the [Student Learning Center Website](#) and submitted to:

Jennifer L. Bolte, Writing Center Coordinator Student Learning Center, SSC 340
jlbolte@csuchico.edu

Applicants will be notified of application status via phone or email. Interviews will be scheduled as applications are received.

- *All work must be performed within the State of California.*
- *Compliance training completion (approx. 4 hours of work time) is required of this position within the first 30 days of work.*
- *The person holding this position may be considered a 'mandated reporter' under the California Child Abuse and Neglect Reporting Act and is required to comply with the requirements set forth in CSU Executive Order 1083 as a condition of employment.*
- *The University is an Equal Opportunity Employer and does not discriminate against persons on the basis of race, religion, color, ancestry, age, disability, genetic information, gender, gender identity, gender expression, marital status, medical condition, national origin, sex, sexual orientation, covered veteran status, or any other protected status.*



INSTRUCTIONAL STUDENT ASSISTANT APPLICATION FOR EMPLOYMENT

California State University, Chico

Office of Academic Personnel
Chico, California 95929-0024
530-898-5029

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

E-mail Address

Chico State ID Number

Mailing Address: Post Office Box or Number and Street

City, State, and Zip

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Home Phone Number

Work Phone Number

Cell Phone Number

EDUCATION (NOTE: Departments may request unofficial transcripts to accompany this application)

Highest degree received and date of receipt:

Name of School

Major

Diploma/Degree Earned

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

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

Student Learning Center
Student Services Center, Room 340
530-898-6839

Faculty Letter of Recommendation for Writing Tutor

Dear Faculty Member:

The Student Learning Center offers all students access to writing tutors. To provide effective service, we are continually seeking qualified tutors. However, before considering a student as a tutor, we require an advanced level of writing skills and knowledge as well as 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 do you rate the student's writing ability?

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 additional comments about the student's writing ability:

Print Name: _____

Signature: _____ Date: _____

Position: _____ Phone: _____

Department: _____

Please return this form to: Jennifer L Bolte, Writing Center Coordinator, at the Student Learning Center through email jlbolte@csuchico.edu. Thank you for your prompt response.