

## Office of Academic Support - Peer Tutor Application

Student ID: _	Center Affiliated With:
Name:	
Address:	
City:	State: Zip:
Phone:	Email:
I am interested	in participating as a:
Peer Tutor (2-3 hrs/week)	Course Assistant Peer Academic Coach All (3-4 hrs/week) (1-2 hrs/week)
Courses I am inter	ested in tutoring:
	Course Name Course No.
I have a Free App	plication for Federal Student Aid (FAFSA) on file
Have you tutored If yes, please exp	l before?
expectations and descriptions, and	this box, I acknowledge that I have read the Peer Tutor FAQ's, and I agree to follow I responsibilities set forth in the Role(s) I have selected which are outlined in the job I what is expected of the Tutee. I also grant permission to the Office of Academic Support to In good academic and student conduct standing with Empire State College.
Signature:	Date:

Thank you for submitting your application. We will contact you upon approval via email.