**After-School Tutoring Program Volunteer Application**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

First Last

**Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Street Apt./Fl.

**City \_\_\_\_\_\_\_\_\_State \_\_\_\_\_\_Zip Code If a student – Grade\_\_\_\_\_\_\_\_\_\_\_\_**

**Home\* # \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ Bus\*.# \_\_\_\_\_\_\_\_\_\_Cell\*# \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_**

**\*Circle the best way to contact you**

**Areas of Interest/ Experience**

**math\_\_\_ algebra\_\_\_ geometry\_\_\_ science\_\_\_ social studies\_\_\_ writing \_\_ vocabulary\_**

**reading comprehension \_\_ reading fluency \_\_games/sports \_\_art \_\_ music \_\_ Book Buddy \_\_\_**

1. Have you ever been convicted of a crime –

* No
* Yes

1. I received a copy of the *Information to Parents* from the Department of Children and Families, Office of Licensing

* No
* Yes

1. I received a copy of the Discipline Policy

* No
* Yes

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your knowledge/work experience in the subject areas checked above and your experience with child care/tutoring/ supervising youth.

Why are you interested in volunteering for Succeed2gether’s After-School Tutoring Program?

How did you hear about Succeed2gether’s After-School Tutoring Program?

**You must be available to attend a 1 hour orientation/training session - DATE: TBD.**

**Best Day/Time for tutoring** (all sessions are conducted at the Montclair Public Library Main Branch)

The expectation is you will tutor 2-3 students one day a week throughout the academic year.

Monday\_\_\_ Tuesday\_\_\_ Wednesday\_\_\_ Thursday\_\_\_ (check all available days)

3:00-4:00 \_\_\_ 3:30-4:30\_\_\_ 4:00-5:00\_\_\_ 4:30-5:30\_\_\_5:00-6:00\_\_\_ (check all possible times)

**Return completed interest application to info**[**@succeed2gether.org**](mailto:rhamade@succeed2gether.org) **or mail to Succeed2gether, P.O. Box 1355, Montclair, NJ 07042. For more information call 973-746-0553 or 973-558-1283. After your interest form is received the Program Manager will call to arrange a phone conference or in-person meeting.**

**The program will be held at the Montclair Public Library, 50 South Fullerton Avenue, Montclair, NJ 07042**