

## ENGLISH LANGUAGE LEARNERS IN-HOME PROGRAM

## PRACTICUM PROGRAM APPLICATION

Return to: 1894 E. William St. #4-125, Carson City, NV 89701 - or - Email to: englishinhomeprogram@gmail.com

Application Date:			
Print Full Name:	Date of Birth_	Age:	
Home Address:	City:St	ate:Zip:	
Country: Home Pl	hone:Cell Phone	<u> </u>	
Email Address:		Male Female	
For statistical purposes: Hispanic/Latino Asian African Caucasian Native American Other prefer not to state Tutor's Availability (2days): Mon. Tue. Wed. Thurs. Fri. Sat. Sun. Times: will tutor Online: SKYPE; ZOOM; Facetime, WhatsApp  want to tutor: Non/Limited Eng. Learner Eng. Conversation GED Computer Citizenship			
Yes No If yes, explain circumstance	ily from a paid or volunteer position or suspended ces		
Have you ever been convicted of a crime, pled guilty to a charge, pled no contest, or have a case pending?  Yes No If yes, explain circumstances			
Have you ever been criminally charged with any crime(s) related to the mistreatment, abuse or molestation of children?  Yes No If yes, explain circumstances			
DO YOU SPEAK A FOREIGN LANGUAGE? (not required for tutoring)  If Yes, What Language?  Yes No If Yes, What Language?  Yes No If Yes, What Language?  Yes No If Yes, What Language?			
If Yes, What Language? Do you want to learn a foreign language?		ood Fluent C	
If Yes, What Language?  Do you want to learn a foreign language?  Level of Education: Less than 12 <sup>th</sup> grad  EDUCATION: Name/Location  (From- To)  High School:	Fair G Yes No If Yes, What Language?  de High School/HSE/GED Some College Unc  Major/Degree	ood Fluent C	
If Yes, What Language?  Do you want to learn a foreign language?  Level of Education: Less than 12 <sup>th</sup> grade  EDUCATION: Name/Location (From- To) High School: College: University:	Fair G Yes No If Yes, What Language?  de High School/HSE/GED Some College Und  Major/Degree	ergrad Degree Graduate Degree	
If Yes, What Language?  Do you want to learn a foreign language?  Level of Education: Less than 12 <sup>th</sup> grade  EDUCATION: Name/Location (From- To) High School: College: University: Other:	Fair G Yes No If Yes, What Language?  de High School/HSE/GED Some College Und  Major/Degree	ergrad Degree Graduate Degree	
If Yes, What Language?  Do you want to learn a foreign language?  Level of Education: Less than 12 <sup>th</sup> grade  EDUCATION: Name/Location (From- To) High School: College: University: Other: WORK HISTORY:	Fair G Yes No If Yes, What Language?  de High School/HSE/GED Some College Und  Major/Degree	regrad Degree Graduate Degree  Dates Attended	
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If Yes, What Language?	Fair G Yes No If Yes, What Language?  de High School/HSE/GED Some College Und  Major/Degree  City/State:	regrad Degree Graduate Degree  Dates Attended  Phone: End Date End Date	
If Yes, What Language?	Fair G Yes No If Yes, What Language?  de High School/HSE/GED Some College Und  Major/Degree  City/State: Start Date	ergrad Degree Graduate Degree  Dates Attended  Phone: End Date Phone: Phone:	

PLEASE COMPLETE OTHER SIDE.....>

Are you willing to have a background check? Yes No Attending monthly Tutor Meetings is mandatory. Yes No Are you willing to perform other duties (i.e., fundraising/training)			
Business Reference:	Phone		
Personal Reference:	Phone		
Personal Reference:	Phone		
I certify that all statements contained in this application and any and that this application is submitted with the knowledge that m information requested may be deemed sufficient cause for denia tutor.	nisrepresentation or failure to reveal		
I hereby authorize any and all persons having information conce otherwise, to furnish it to the authorized agent of the English La Program.			
I understand that this is a no-cost-to-student program, that my services are on a volunteer and/or internship basis and that I will not receive remuneration or services from my assigned student(s) or the ELL Home Program.			
I hereby expressly waive, release and forever discharge the ELL In-Home Program and its agents, from any and all manner of action and causes of action whatsoever (including auto accidents), which I, my administrators or executors can, shall, or may have against the ELL In-Home Program, or its agents, as a result of my position with the ELL In-Home Program.			
I understand the cost of this program is \$300. With this app \$150 via your website. When I accept the student assigned,			
Print Name :	Date:		
Signature:	(electronic signature ok)		
OFFICE USE ONLY:			
	State: Date		
Student(s) Start Date Book Level Days	Time Location		
TutorTrainer'sComments:			
	(Rev.1/8/2021)		