# Student Support Services
# Peer Tutor Application

Name: _____

Date of Birth: _____

Student ID #   D_____

Address:

_____

_____

Phone: _____

Email: _____

Are you currently working for DSCC in any other capacity?  (Tutor, work study, etc.)_____

If yes, how many hours a week are you working? _____

To be considered for a tutoring position, the applicant has to have at least a 3.0 overall GPA and have earned at least a "B" in the subject they wish to tutor.

Subject(s) you wish to tutor:

_____                    _____

_____                    _____

_____                    _____

By signing below, I acknowledge that I meet the above requirements to become a peer tutor for the Student Support Services Program at DSCC.  I also give permission for the SSS staff to access my transcript to verify my GPA and course grades to determine my eligibility.

_____                    _____

Signature                                                                                    Date