Writing Center Consultant Application University of Mississippi Tupelo Campus



Name:				
Last				M.I.
Student ID number: _				
Addresses Campus: Home: Email:			Phone:	
College Classificatior Freshman Soph	:	unior	Senior	Grad/Law
Major:				GPA:
Minor: Date of Expected Gradu	uation:			
Are you currently empl If yes, how many ho	oyed at the Unive	ersity?	Yes	No
Are you eligible for the	Federal Work-Stu	udy Program?	Yes	No
Are you planning to stu If yes, when? Seme	,	Year:	Yes	No
Requesting work for (cl What is the first day				Summer
Work Experience Include present employ Employer:	ment, if applicab Address:	le, and most r Position:		Dates:
References Include one academic r	eference and one	e business or p	ersonal referer	nce.
Name:	UM Dep't or Compa	ny: Email:		Phone:

Initial here to grant the Writing Center permission to contact these references: _

Employment Preferences

How many hours would you like to work per week (20 max)? _	
What is the minimum number of hours you would accept?	

Shift preference (check Mornings		nings			
Class Schedule: Days	Times		Course		
Are you interested in o	nline tutoring?	Yes		No	
Are you interested in tutoring at a mobile location?		Yes		No	
Do you have tutoring experience?		Yes		No	

Signature:	r		
Signature.		Date:	
Signaturer		Date	

Your application can be submitted electronically or in person.

Email Rachel Johnson at rejohns3@olemiss.edu or stop by Office 239D.

Attach the following:

- This application
- Your current c.v./resume
- An academic writing sample