

TUTOR REGISTRATION FORM

Please print

DATE: _____ NAME: _____

ADDRESS: _____

TELEPHONE: (H) _____ (W) _____ Fax: _____

EMAIL ADDRESS: _____

Please indicate which grade level you prefer:

Elementary (Grade _____) Intermediate (Grade _____) Senior High (Grade _____)

Please indicate any subject areas you are interested in tutoring in: i.e. math

Availability:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

morning afternoon evening

Please state your teaching/tutoring experience (if any): _____

What is your French language level (if known) or education in French: _____

Please list references and contact information (personal/teaching/tutoring):

Please note:

It is the responsibility of the tutor and the person requesting a tutor to make all arrangements. i.e. financial, requirement for criminal check, time, place etc. CPF P.E.I. is a clearing house for information only.

Once you register with us we will send your information to any person requesting a tutor. We ask you to let us know if you have undertaken any tutoring assignments so that we can add it to your file.

Please send the completed TUTOR REGISTRATION FORM to Gail at Fax: 368-7415 or by mail to PO Box 2785, Charlottetown, PE, C1A 8C4 or email to glecky@cpfpei.pe.ca

For information call 368-3703.