



### ESL Volunteer Application

Send your completed application to Kevin Walsh, ESL Coordinator at Indian Trails Public Library District, 355 Schoenbeck Rd. Wheeling, IL 60090.

You are applying to be a tutor in ITPLD’s ESL Tutoring Service. This is a service open to ESL students enrolled in the Intermediate or Advanced classes or have graduated from the ESL classes and are in need of additional instruction. A student’s tutoring needs may range from additional grammar and pronunciation practice to cultural or life skills.

**Date of Application:** \_\_\_\_\_

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Are you an ITPLD cardholder:**  Yes /  No

**Volunteer Availability** (Check the Boxes that you are available)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

**Share your experience with the following related tutoring areas:**

<b># of Years of Experience</b>	
	<b>English grammar, reading or pronunciation instruction and/or prior ESL tutoring experience</b>
	<b>US Citizenship Test Practice</b>
	<b>TOEFL Practice (Test of English as a Foreign Language)</b>
	<b>Employment or Educational Evaluation Practice (written or verbal)</b>
	<b>Resume Review and/or Job Interview Coaching</b>



**Work Experience:**

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**Volunteer Experience:**

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**Education:**

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**Provide at least two references related to your tutoring experience, whom the library may contact:**

<b>Reference #1 Name:</b>	
<b>Phone</b>	
<b>Relationship</b>	
<b>How long have you known this person?</b>	

<b>Reference #2 Name:</b>	
<b>Phone:</b>	
<b>Relationship:</b>	
<b>How long have you known this person?</b>	



**Emergency Contact Information**

<i>Emergency Contact #1</i>	<i>Emergency Contact #2</i>
<b>Name:</b>	<b>Name:</b>
<b>Phone:</b>	<b>Phone:</b>
<b>Relationship:</b>	<b>Relationship:</b>

**Volunteer Agreement**

I agree that the information below is valued and understand that my final approval is dependant on the passing of a background check and that if I'm accepted as a volunteer I will be expected to follow all library policies.

I understand that I am not an employee of the library. I understand the library depends on its volunteers. I will arrive at the designated day and time, be dressed appropriately and will fulfill my assignment in a responsible manner. If I am unable to volunteer on my scheduled day and time, I will notify the ESL Coordinator as soon as possible.

I have read and agree with the above statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date