



COMPUTER ASSISTED LEARNING CENTER
HILO PUBLIC LIBRARY
P.O. BOX 11499 HILO, HAWAII 96721 808-933-8893

TUTOR/VOLUNTEER REGISTRATION FORM

DATE: _____ CODE: _____

NAME: Mr / Ms _____ Phone: _____

Address: _____

Birthdate: _____ Library Card: Y ___ N ___ CALC _____

Date available to begin: _____

Best time to volunteer: Tues ___ Wed ___ Thurs ___ Fri ___ AM ___ PM ___

Describe your previous experience with teaching, tutoring, volunteering: _____

Describe any training related to literacy: _____

What special skills, knowledge, hobbies or interests do you have that might help us in placing you with a learner or other volunteer position? _____

Is English your native language? Yes _____ No _____

If not, how long have you been speaking English? _____

Do you feel competent to teach English? _____ Math? _____ Computers? _____

Please specify any physical or other considerations that should be considered in placing you:

Why do you want to volunteer at CALC? _____

How did you learn of CALC? Friend? _____ Internet? _____ Library? _____ Other _____

Are you employed? Yes _____ No _____ Are you retired? Yes _____ No _____

Current occupation or most recent job: _____

Past work experience: _____

Educational background: _____

Highest grade completed: _____

Thank you volunteering!