

DEPARTMENT OF CHEMISTRY
CHEMISTRY DROP-IN TUTOR CENTER APPLICATION

Name _____	Date _____
Mailing Address _____	Student ID _____
E-mail Address _____	Local/Cell Phone _____
Class Standing _____	Perm/Home Phone _____
	Major _____
	Minor _____

Chemistry courses you have taken

Chem 181 (Gen C 1) lecture	Grade _____	Quarter _____	Professor _____
Chem 182 (Gen C 2) lecture	Grade _____	Quarter _____	Professor _____
Chem 183 (Gen C 3) lecture	Grade _____	Quarter _____	Professor _____
Chem 361 (organic 1) lecture	Grade _____	Quarter _____	Professor _____
Chem 362 (organic 2) lecture	Grade _____	Quarter _____	Professor _____
Chem 363 (organic 3) lecture	Grade _____	Quarter _____	Professor _____

--If you attended a semester school, disregard the third course in each sequence above and below--

Please describe any previous experience you may have that is relevant, such as working as a tutor or as a lab teaching assistant (TA):

How would you rate your ability in supporting an undergraduate student with both content and problem solving in the following courses: (low rating = 0 -----high rating = 5)

CHEM 181, gen chem 1 0-----1-----2-----3-----4-----5

CHEM 182, gen chem 2 0-----1-----2-----3-----4-----5

CHEM 183, gen chem 3 0-----1-----2-----3-----4-----5

CHEM 361, organic 1 0-----1-----2-----3-----4-----5

CHEM 362, organic 2 0-----1-----2-----3-----4-----5

CHEM 363, organic 3 0-----1-----2-----3-----4-----5

For full consideration, be sure to complete the other side of this form

Schedule indicate times you are NOT available

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00-9:00					
9:00-10:00					
10:00-11:00					
11:00-12:00					
12:00-1:00					
1:00-2:00					
2:00-3:00					
3:00-4:00					
4:00-5:00					
5:00-6:00					

Do not write below this line

Help Center Assignment(s)

Day(s) _____ Time _____

Day(s) _____ Time _____

Last Quarter GPA _____ Cum GPA _____