

COLORADO DEPARTMENT OF EDUCATION
COLORADO REFUGEE ENGLISH AS A SECOND LANGUAGE (CRESL) PROGRAM

VOLUNTEER TUTOR INFORMATION FORM

Date _____

Mr. Mrs. Ms. Miss _____
Last First Middle

Address _____
City ZIP

Phone (H) _____ (W) _____ e-mail: _____

Employer Address _____
Name Street City ZIP

Formal training in ESL? Yes ___ No ___. If yes, where and when? _____

Travel, hobbies, special interests: _____

How did you hear about this Program? _____

Previous volunteer experience? _____

Why do you want to tutor? _____

Please circle time available: Daytime Evening Weekends

Distance you can travel to your student's home? (miles or drive time) _____

Can you commit to tutor a minimum of 4 months? Yes ___ No ___

Preference for tutoring, if any _____

Please list two references: 1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

MAIL TO: Sharon McCreary, Volunteer Coordinator or **FAX:** 720-423-4771
Colorado Refugee ESL Program
EGOS
1250 Welton St.
Denver, CO 80204
E_MAIL: sharon_mccreary@dpsk12.org

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VOLUNTEER TUTOR CONTRACT

POSITION TITLE: In-Home Volunteer ESL Tutor

PROGRAM OBJECTIVES: To assist an adult refugee in acquiring or improving their English language skills. The student will be a limited-English-speaker identified by the CRESL Program as needing assistance in the skill areas of listening, reading and writing.

TIME COMMITMENT: A minimum of two hours per week for a minimum of four months.

RESPONSIBLE TO: CRESL Volunteer Coordinator



POSITION RESPONSIBILITIES:

- Become familiar with and learn to use ESL texts and materials by **completing** CRESL training.
- Prepare ESL lesson plans and materials as necessary for each tutoring session.
- Tutor students in English survival skills and other areas as needed.
- Familiarize student with American culture and customs.
- Be reliable and on time to scheduled tutoring sessions. Give as much notice as possible if you are unable to meet with your student. Arrange a mutually satisfactory time for a make-up session.
- Attend quarterly in-services.
- Consult CRESL Volunteer Coordinator as questions, concerns, or problems arise.
- ★ *Record monthly tutoring hours and mail/fax/e-mail or call in to CRESL Volunteer Coordinator.*
- Respect the confidentiality of the student/tutor relationship.

I have read and understand the above and agree to carry out the responsibilities as described.

I understand that if accepted to be an In-Home Volunteer ESL Tutor for the CRESL Program that I represent the State of Colorado and agree to abide by rules thereof.

Signature _____

Date _____

CRESL Volunteer Coordinator

MAIL/FAX/E-MAIL TO:
See application or information form