

Friends of Tyler School (FOTS)

Background

The Friends of Tyler School program (FOTS) was established by neighbors of the John Tyler Elementary School on Capitol Hill, Washington, DC, in March of 1990. At its inception, twenty-five tutors were paired with twenty-five children in kindergarten through 3rd grade. At the request of these children's families, the program began serving older siblings and cousins. Today, FOTS serves more than fifty children (ages 5 to 18).

The mission and goal of the Friends of Tyler School is to provide educational and enrichment experiences for at-risk children in inner city Washington D.C. The core program provides one-on-one tutoring with a volunteer tutor and mentor who promotes positive values and behaviors, provides emotional support, and helps the student to increase his/her academic skills, social skills, and self-confidence. After school and summer programs run by paid certified teachers and volunteers also help to reinforce these goals.

Volunteer and Employee Information Form

Friends of Tyler School (FOTS) screens prospective employees and volunteers to evaluate whether an applicant poses a risk of harm to the children and youth we serve. Information obtained is not an automatic bar to employment or volunteer work, but is considered in view of all relevant circumstances. This information is required by all applicants for volunteer or paid positions in order for the applicant to be considered. Any falsification, misrepresentation, or incompleteness of the requested information is grounds for disqualification or termination. In addition to reviewing the application form attached, FOTS requires applicants to agree to a DC Metropolitan Police Department criminal and traffic background check.

Information provided on this form is confidential. Access to and review of information provided or obtained will be limited to individuals authorized by the FOTS Board of Directors.

If you have any questions or concerns about this application form, please contact:

Tonya Porter Woods- Executive Director
Friends of Tyler School
(202) 547-1345

FRIENDS OF TYLER SCHOOL (FOTS) TUTORING

1527-1529 Pennsylvania Avenue, S.E., DC 20003
202-547-0006 or 547-1345

TUTOR APPLICATION FORM

1. **Full Name:** _____ **Date** _____

2. **Current Address:** _____

_____ **zip code** _____

3. **Years at This Address:** _____

4. **Previous Address:** _____

_____ **zip code** _____

5. **Years at Previous Address:** _____

Note: If you have lived at these two address for less than five years, please provide a list of **all** addresses (including dates) where you have lived during the last five years on an attached sheet.)

6. **Home Phone Number:** _____

7. **Office Phone Number:** _____

8. **E-Mail Address** _____

(please print large and clear)

9. **I would be best as a tutor or willing to tutor a child who is (check appropriate choices below):**

_____ very young (K - 1st)

_____ slow and behind in school

_____ young but reads some (2nd-3rd)

_____ doing well but needs enrichment

_____ older (4th-6th grades)

_____ in need of limit setting and/or hyperactive

_____ Middle school - Junior High

_____ eager to go on weekend outings

___ Boy ___ Girl

_____ needs tutor transportation to/from tutoring

10. **Check any appropriate statements below:**

___ I can help at my job with the FOTS program's United Way and Combined Federal Campaign (CFC) solicitations.

___ I would like to help organize: ___group outings ___holiday parties ___ fundraisers/benefits

Page 2 - Name of Applicant: _____

- 11. **If you have any special skills, interests or resources that might benefit the FOTS program, please comment on them below:**

Tutoring takes place on Mondays, Tuesday, Wednesday and Thursday nights.

- 12. **I prefer to tutor on _____ nights. My second choice for a tutoring night is _____.**

BACKGROUND QUESTIONS:

- 1. **Social Security Number:** _____
- 2. **Date of Birth:** _____
- 3. **List all names that you have used including a birth name and nicknames:** _____

Employment History

- 4. **Profession/ Occupation:** _____
Current Employer: _____
Address of Employer: _____

Supervisor's Name: _____
Supervisor's phone number: _____
Years with this employer: _____
- 5. **Previous Employer:** _____
Address of this Employer: _____

Supervisor' Name: _____
Supervisor's Phone Number: _____
Years with this employer: _____

Page 3 - Name of Applicant: _____

NOTE: If these two employers have employed you less than five years, please provide a list of all employers or other activities (travel, school attendance, job hunting, etc.) in which you participated during the last five years on an attached sheet. Include dates, the job or activity, location and a contact person (if appropriate) including a phone number.

6. **Have you ever been charged or convicted of a felony?** _____ (If yes, please explain on a separate sheet of paper.)

7 **References:** Please identify three unrelated individuals that FOTS can contact about your character and qualifications to be a tutor for the FOTS program. Two references should be personal references and one should be a professional reference, such as a teacher, advisor, colleague or supervisor not listed elsewhere on this form. Each reference must include the individual's address and phone numbers and length of time they have known you; one of your references must have known you for at least five years.

References:

Name _____

Address _____

Home phone _____ **Office phone** _____

How do you know this individual? _____

For how long have you known this individual? _____

Name _____

Address _____

Home phone _____ **Office phone** _____

How do you know this individual? _____

For how long have you known this individual? _____

Name _____

Address _____

Home phone _____ **Office phone** _____

How do you know this individual? _____

For how long have you known this individual? _____

Page 4 - Name of Applicant: _____

NOTE: Many FOTS’ tutors and other volunteers drive students to and from tutoring and/or to and from outings and other activities. It is not essential that volunteers agree to drive students. Some volunteers use public transportation to take students on outings. Your willingness to drive students will not impact on your acceptance as a volunteer or employee. **If you are willing to drive FOTS’ students, you must respond to # 23-26 below.** Otherwise, you **may not** drive FOTS’ students or their parents at any time.

8. Do you have a current Drivers License? _____

9. Please list the State and your Drivers License Number.

10. Have you ever had your Drivers License revoked or suspended? _____
(If yes, please explain on a separate sheet.)

11. Please attach proof of insurance showing minimum liability coverage of \$100K/300K

I certify that all of the information I have provided on this FOTS Volunteer Information Form and any attachments are accurate. I give FOTS Board of Directors or its designated agent permission to contact all persons listed in this form and to do other appropriate background checks, including a criminal and traffic background check. I understand that any falsification, misrepresentation, or incompleteness of the requested information is grounds for disqualification or termination.

Signature

Date