



**2021 – 2022
Cal-SOAP Student Staff Application**

Which position(s) are you applying for? Academic Tutor College Success Coach
With what age group(s) would you prefer to work? Middle School High School College

Name: _____ **Email:** _____ **Date:** _____

Mobile Phone: _____ **Home Phone:** _____

Address: _____

Date of Birth: ____/____/____ **Preferred Method of Communication?** _____

Are you available to work for the entire public school year through mid-June?

Yes No If not, what date can you work until? _____

Do you want to be considered for summer employment? Yes No

Do you want to be considered for evening tutoring work? Yes No

Are you also applying to have Cal-SOAP hours fulfill an internship requirement? Yes No

College you will be enrolled in 2021-2022: CR HSU Other _____

College Major: _____ **Career Goal:** _____

How many units will you be taking? _____ **Current GPA:** _____

Expected Graduation date (semester/year): _____

Will you be transferring? (semester/year/school): _____

Do you have the tools to be able to connect with students online (laptop, stable internet, webcam, phone)? Yes No **Comments:** _____

Are you willing to work with students: In-person Online Both

If in-person: School Site Location for Tutoring/Advising: (Check Preferred work locations)

- Crescent City McKinleyville Arcata Blue Lake Eureka
- Fortuna Ferndale Miranda Hoopa

Availability: Please specify the days and hours you are available to work.

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
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How many hours per week do you prefer to work? _____

What is your main form of transportation? Personal Vehicle Bike Bus

With what age group would you prefer to work? Middle School High School College No Preference

Why are you interested in working for Cal-SOAP?

Education Summary:

School or Institution	Name & Location	Years Completed & Date	Did you graduate?	Course of Study	Degree or Certificate
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	NA	
Junior College (if applicable)			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other College or University			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Business/Trade School, Military			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Subject	Grade Received (High school or College)	Tutoring Ability and/or Comments (Please check whether you are comfortable or not comfortable tutoring each subject)
Pre-Algebra		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Algebra I		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Geometry		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Algebra II		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Trigonometry		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Calculus		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
English:		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Sciences		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:

List the highest course you have completed for the following subjects:

Math: _____ English: _____

List all languages you can speak or write fluently other than English: _____

List other volunteer and/or extra-curricular activities/clubs/sports you are currently involved in:

Have you completed and submitted the FAFSA/CADAA on your own? Yes No

Would you be willing to help students fill out their FAFSA/CADAA if provided training? Yes No

Have you used WebGrants 4 Students before? Yes No

How comfortable are you with public speaking? Not at all comfortable Somewhat comfortable
 Comfortable Very comfortable

Would you be comfortable making phone calls to students' guardians to update them on their students' progress? Yes No

Do you have past experience as a financial aid advisor? Yes No
 If yes, please describe: _____

Previous Employment: List your four most recent jobs, beginning with your current or most recent job(s).

Employer Name and City/State:	Job Title:	Start Date	Reason for Leaving:
Supervisor's Name/ Phone number: May we contact this employer?	Job Duties:	End Date	
		# of weekly hours	

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Supervisor's Name/ Phone number: May we contact this employer?	Job Duties:	End Date	
		# of weekly hours	

Professional References: Please list two professional references who can comment on your dependability and work performance. Do not include friends/relatives. If using faculty, we must have home telephone numbers.

<u>Name</u>	<u>Business/Title</u>	<u>City/State</u>	<u>Phone</u>
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How did you hear about Cal-SOAP? (Please check one or more below):

- HCOE Web Listing
 Craigslist
 Handshake
 Indeed
 HSU Job Fair
 Flyer
 Friend
 CR Job Board
 Professor
 Other: _____

Please note that all employees are required to be tested for tuberculosis, present evidence of freedom from the disease, and be fingerprinted. Employees must have fingerprint clearance before working in the schools.

I certify that I meet all the minimum requirements as specified in the position announcement and/or job description and that all information contained in this application and in the supplementary material filed with it is true and accurate. I authorize the contact of any present or former employer to verify any information pertaining to this application and I release from liability any persons or other organizations furnishing such information. I understand that any false statements or omissions of material facts on the application will subject me to disqualification from the application process or dismissal if employed.

Applicant Signature

Date

Return Completed Application Packet to:

Cal-SOAP ♦ Humboldt County Office of Education ♦ 901 Myrtle Avenue ♦ Eureka, CA 95501
Telephone: (707) 441-2006 ♦ Fax: (707) 445-7180 E-mail: calsoap@hcoe.org