

Community English Tutoring Ministry (ELL) Student Application Form

Name: _____ Phone: _____

Address: _____ Email: _____

*Please note this program is only available in Sioux Center.

What level of education have you completed?	Age:	What country are you originally from?
What language(s) do you speak?		Please indicate your level of English ☐ Beginner ☐ Intermediate ☐ Advanced
Please indicate your learning interests/goals: ☐ Conversation ☐ Reading ☐ Writing ☐ Grammar ☐ Citizenship Test ☐ Other (please specify):		

Please indicate what times you are available each day so that we can match you with a tutor:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

Are you currently, or have you in the past, attended any English classes? Please describe below.

Why do you want to participate in one-on-one English (ELL) tutoring?

Where would you like to meet for your classes?

Upon being selected to be a part of the Community English Tutoring Ministry (ELL), you will be responsible for meeting with your tutor at least 3 times per month for one hour sessions. If you do not abide by these requirements, it may affect your participation in the program and your tutor could be assigned to another student. If you agree to commit to the program, please sign and return this form to the designated individuals listed below.

Signature: _____ Date: _____

Please submit applications to:
Ruth Mahaffy at

- Sioux Center Public Library | 102 S Main Ave, Sioux Center, IA 51250
- Bethel CRC | 341 S Main Ave, Sioux Center, IA 51250
- EnglishTutoringMinistry@gmail.com