## **Community English Tutoring Ministry (ELL) Tutor Application Form**

Name:				Phone	Phone:			
Address:  *Please note this program is only available in Sioux Center.				Email	Email:			
Do you have any experience teaching or tutoring? (Experience is not required; training will be provided.)								
Do you speak another language(s)?								
What makes you interested in participating in the Community English Tutoring Ministry?								
Please indicate what times you are available each day so that we can match you with a student:								
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
From:								
To:								
adult I	English langua	ge learners. I a n. I also unders	gree to meet stand that this	ng Ministry is a with my student is a Christian rour immigrant i	t at least 3 time ninistry that se	es a month for	r at least one	
Signatui	re:					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

