



Tutor Application Package

Tutor Application

Date of application _____

Last name _____

First name _____

Address Civic number _____ Apartment _____ Street _____

Municipality _____ Postal Code _____

Phone numbers Home _____ Cell _____ Email _____

Date of birth _____ Age _____ Gender Female Male

Language(s) spoken _____

Education High School _____ Last grade completed _____

CEGEP _____ Program _____

University _____ Program _____

Vocational _____ Program _____

Other courses or programs taken _____

Employment _____

Can your company or organization be of a support to the Epona Foundation? Yes No How? _____

Hobbies and interests _____

What subjects are you competent to tutor? _____

What qualities or skills could you offer our program? _____

What gender and age range would you prefer to tutor? Male Female Pre Teen Teen

What are you available? M am pm T am pm W am pm Thur am pm F am pm Sat am pm Sun am pm

References (other than family members)

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

How did you hear of the Epona Integrated Riding Program? _____

3347 Bd. Des Sources PO. Box 38104 Dollard des Ormeaux QC H9B 3J2 Phone & Fax 514.421.7433 / www.eponafoundation.com



Tutor Application Package Contract for Tutors

I, _____ will make a commitment to fulfill my role as a tutor by:

1. Conducting myself in a professional and respectful manner.
2. Completing necessary preparation before each scheduled session.
3. Being available to meet during scheduled days and times.
4. Completing evaluations and progress reports.
5. Calling the Stay in School coordinator in advance to inform of an absence.
6. Respecting the student's abilities and disabilities and conducting myself accordingly.
7. Understanding that for unsatisfactory performance, I may be terminated from my position.
8. Realizing that confidential information about the students should only be discussed with other staff in a confidential setting. Such information should only be discussed for professional reasons directly tied to the welfare of the students.

I have read the information on this contract and agree to my responsibilities in keeping this contract valid. I agree that a violation of any part of this contract may result in the termination of my tutoring sessions.

Tutor's Signature

Date

Parental Consent for tutors under 18 years old.

I understand that my son/daughter has volunteered to tutor for the Epona Integrated Riding Program and that the Epona Foundation is not responsible for my child's travelling to and from the tutoring stations.

As a parent I also understand that it is mine and my child's responsibility to ensure that they put their school work first and do not over extend themselves in providing the volunteer tutoring services for Epona.

Parental Consent for use of photos and videos.

I permit I do not permit the Epona Foundation to use pictures/videos of my son/daughter while tutoring or attending any of the Epona Foundation activities and that these photos may be used for website and publicity purposes. However I understand that Epona will not publish names and photos together

Parent Signature if tutor is under 18 years

Date

3347 Bd. Des Sources PO. Box 38104 Dollard des Ormeaux QC H9B 3J2
Phone & Fax 514.421.7433 / www.eponafoundation.com