

Tutor Enrolment Application

Please complete the following application form and return it to the College
E-mail: office@macclesfieldtutorialcollege.com, or
Post: Macclesfield Tutorial College, 20 Cumberland Street, Macclesfield SK10 1DD.

Tutor Information

Full Name: _____ Date: _____
Surname Firstname Title

Address: _____
Line 1 Line 2

_____ *Town/City County Post Code*

Phone 1: _____ Mobile Phone: _____

Date of Birth: _____ Gender: _____ Own Transport? (Yes/No): _____

Email Address: _____

Subjects Taught

Subject 1: _____ Level (delete as appropriate): **Infant / Junior / GCSE / A Level / Undergrad**

Subject 2: _____ Level (delete as appropriate): **Infant / Junior / GCSE / A Level / Undergrad**

Subject 3: _____ Level (delete as appropriate): **Infant / Junior / GCSE / A Level / Undergrad**

Subject 4: _____ Level (delete as appropriate): **Infant / Junior / GCSE / A Level / Undergrad**

Subject 5: _____ Level (delete as appropriate): **Infant / Junior / GCSE / A Level / Undergrad**

Subject 6: _____ Level (delete as appropriate): **Infant / Junior / GCSE / A Level / Undergrad**

Teaching Qualifications

Teaching Qualification: _____ Main Teaching Subject: _____

College/University: _____

FIRST DEGREE:

Name (BSc, etc): _____ Subject: _____ Classification: _____ University: _____

HIGHER DEGREES AND OTHER QUALIFICATIONS:

Higher Degree: _____ Subject: _____ University: _____

Other: _____ Subject: _____ Institution: _____

PROFESSIONAL QUALIFICATIONS:

Professional Qualification: _____ Professional Body: _____

Current Place of Work: _____ Position: _____

Length of Service: _____ Years: _____ Months _____ Full or Part Time (delete as appropriate): **Full / Part**

References

Please list two professional references that we can contact.

Full Name: _____ Position: _____

Email: _____ Phone: _____

Address: _____

Full Name: _____ Position: _____

Email: _____ Phone: _____

Address: _____

Availability

I am available to teach at the following locations (please check all that apply):

IN COLLEGE

STUDENT'S HOME

ONLINE

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____