

STUDENT SUCCESS CENTER
ACADEMIC SUPPORT
SI LEADER/TUTOR APPLICATION CHECKLIST

Please check off once task has been completed.

- Complete internal SSC SI leader/tutor application.** Include for submission to be delivered to the SSC.
- Check to see if you are financial aid work-study eligible (you will do this by visiting the Financial Aid office).** If you are work-study eligible, please include a copy of your Work-Study Eligibility Award Letter.
- Complete the appropriate online HR application.**
 - **Work Study-Supplemental Instructor- Tutor (Requisition ID: 1081)**
 - **Student P/T-SI Leader- Student Success Center (Requisition #1065)**
- Read and electronically sign the Confidentiality/Acknowledgment Agreement. Include for submission to be delivered to the SSC.
- Distribute the recommendation form link to the instructors who can speak of your ability to serve as a SI leader/tutor.



Student Success Center
Supplemental Instruction (SI) Leader Application

Print Clearly:

Name: _____
Last First MI

Local Address: _____
Street City State Zip

Student email address: _____@student.LIFE.edu **Circle: UG | DC**

Student ID # _____ Phone # _____

1. I am confident with my abilities in the following subjects and wish to be considered for the following positions/courses:

2. Why are you interested in this position and why do you feel that you are a good candidate?

3. What advice would you give other students to help them become successful students?

4. Describe three study strategies that have helped you perform well in your classes.

5. Have you ever attended an SI session at Life University? How did you benefit from the program?

6. If selected for this position, I will be able to attend the SI leader training that is scheduled for the Saturday of week 1 from 9:30am-5pm in CCE 109. **Circle one: Yes / No**

7. If you are an international student, have you met with Matikeeva-Kinney Sairaguhave about employment status as an international student? **Circle one: Yes / No**

I hereby attest that all information contained in this application is truthful and accurate.

Signature

Date



Staff Confidentiality Acknowledgement Form

Any information learned during the performance of one's work in the Student Success Center at Life University which is not commonly available to the public must be kept confidential. This applies to information about students, faculty, and staff, research, and business affairs. Further, this applies to information in any form – spoken, written, or electronic.

Each individual working whether paid or volunteer in the Student Success Center environment is responsible for protecting the privacy of our employees, our staff, and our students, and must take care to preserve confidentiality in conversations and in handling, copying, faxing, and disposing of documents. Unusual activity or behavior which could threaten confidentiality should be questioned and reported to the Director of your area.

Access to Student Success Center information is permitted only as required for the performance of one's job. For example, reading confidential information not directly required for the job performance, even if that information is not further disclosed, is a violation of policy and is, therefore, strictly prohibited. All policies and procedures related to authorization and access to confidential information must be followed.

Student Success Center computer systems and networks requiring passwords may be accessed only by people with an officially granted account. Each person is responsible for maintaining confidentiality by never sharing passwords or access and by always locking or logging off a terminal or workstation when leaving the area. Each person is accountable for all activity occurring under his/her account or password. Such activity may be monitored.

Disclosure of Student Success Center confidential information is prohibited except when required for the performance of one's job and only when specifically authorized. Disclosure of confidential information is prohibited indefinitely, even after termination of employment or business relationship, unless specifically waived in writing by an authorized party.

I certify that I have received and read this confidentiality Acknowledgement and understand the requirements set forth in it. I understand that the unauthorized release or removal of such information, whether to parties internal to the university or external, is strictly prohibited under Federal law and could subject me to criminal and civil penalties imposed by law. Any such willful or unauthorized disclosure also violates university policy and will be cause for disciplinary action, up to and including termination from employment regardless of whether criminal or civil penalties are imposed.

Signature SSC Employment Title Date

Print Name