

H.E.L.P.
Marshall University
520 18th Street
Huntington, WV 25755

Learning Specialist Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Wage: \$ _____ per hour

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you worked for Marshall University before? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

Degree	Institution	GPA	Date	Major	Minor
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Academic Awards and Honors _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Questions for Potential Learning Specialists

What subject areas do you feel qualified to teach?

What experience have you had with students who have learning disabilities and/or ADHD?

Do you have any special or specific training in learning disabilities and/or ADHD?

What ages or grades are you most comfortable with?

Disclaimer and Signature

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Please give Reference Forms to two people who know you professionally and return them to:

Laura Rowden, M.A., Coordinator, Community H.E.L.P.

Marshall University H.E.L.P. Program

520-18th Street

Huntington, WV 25755

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