



Taos Pueblo Education & Training Division

Mentoring/Tutoring Application

Applicant Information

Name (First, MI, Last):			
Date of Birth:		Social Security #:	
E-mail Address:			Male Female
Phone #:			

Mailing Address: _____
P.O. Box/Street City State Zip Code

Physical Address: _____
Street City State Zip Code

Education History

Please list all High Schools or High School Equivalency programs attended:

Name of High School	City and State	Dates of Attendance	Degree Earned

Please list all Colleges/Universities or trade schools attended (if applicable):

Name of College/University/Trade School	City and State	Dates of Attendance	Degree Earned



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Employment and Training History

Please list 3 current or previous employers starting with the most recent.

Employer Name	Position	Dates employed

Describe your experience working with youth:

Please list trainings attended or certifications attained:

Describe your knowledge of computers and technology:

Describe any teaching experience:

Please provide three references:

Name	Phone Number	Years Known

I certify that the answers given herein are true and accurate and understand that any false or misleading information given in my application shall be sufficient cause for dismissal or refusal of employment. In the event of employment, I further understand that I am required to abide by all policies, rules, and regulations of Taos Pueblo CMS.

Signature of Applicant

Date