## Please read these instructions completely.

## Save this file to your computer.

## To electronically complete this application, place your mouse in the gray field labeled “Last”. You may begin typing at this point.

## Use the TAB key to move between areas on the application.

## If a question requests that you indicate a selection, click the appropriate box with your mouse to place an “X” in the box. Clicking the box again will remove the “X” from the box.

## When you have completed the application, print pages 2 through 5 of the application, sign the application and bring it to:

## Serena B. Tenison, M.A. & Camille Pearce

## Supplemental Instruction Program

## Clarke M. Williams Student Success Center

1. Ask an instructor to complete the Recommendation Form found at http://www.ulm.edu/studentsuccess/docs/SIFaculty.doc and return it to the Student Success Center.

## All applications must be typed. Hand-written, incomplete, or unsigned applications will not be accepted.

## If you have any questions, comments, or need help filling out the application, please contact Serena Tenison (tenison@ulm.edu) or Camille Pearce ([pearce@ulm.edu](mailto:pearce@ulm.edu)). We can also be reached at 318-342-3667.

## UMKC SI Logo

## SI Leader Application

*Supplemental Instruction Program*

*Clarke M. Williams Student Success Center*

*Phone: 318-342-3667*

*http://www.ulm.edu/studentsuccess*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | |  | | | |  | | Date: | |  |
|  | | | | Last | | | | | | | | | First | | | | M.I. | | | | |
| Local Address: | | | |  | | | | | | | | | | | | |  | | | | |
|  | | | Street Address | | | | | | | |  | | | | | | Apartment/Unit # | | | | |
|  | | | |  | | | | | | | | | | | | |  | | |  | |
|  | | | City | | | | | | |  | | | | | | | State | | | ZIP Code | |
| Cell Phone: | | (     ) | | | | | | | | | | | Home/Dorm Phone: | | | | (     ) | | | | |
| E-mail address (active & used daily): | | | | | | | | | | | | CWID: | | | | | | |  | | |
| Major: |  | | | | | Classification: | | | | | | | | | | | | | | | |
| Course Information | | | | | | | | | | | | | | | | | | | | | |
| For which course(s) are you applying to be an SI Leader? (Check all that apply) | | | | | | | | | | | | | | | | | | | | | |
| **Biology** | | | 1014 | | | | | 1015 | | | | | | 1020 | |  | |  |  | | |
| **PHYSICS** | | | 2003 | | | | | 2004 | | | | | |  | |
| **Chemistry** | | | 1001 | | | | | | 1007 | | | | | | 1008 | | |  |  | | |
| **ECON** | | | 2002 | | | | | |  | | | | | |  | | |  |  | | |
|  | | | | | | |  | | | | | | | | | | |  | | | |
| List your grade in the following subject(s) for which you would like to be an SI Leader | | | | | | | | | | | | | | | | | | | | | |
| **Subject** | | | | | **Instructor** | | | | | | | | | | | | **Semester/Year Taken** | | | | **Grade** |
| BIOL 1014 | | | | |  | | | | | | | | | | | |  | | | |  |
| BIOL 1015 | | | | |  | | | | | | | | | | | |  | | | |  |
| BIOL 1020 | | | | |  | | | | | | | | | | | |  | | | |  |
| CHEM 1001 | | | | |  | | | | | | | | | | | |  | | | |  |
| CHEM 1007 | | | | |  | | | | | | | | | | | |  | | | |  |
| CHEM 1008 | | | | |  | | | | | | | | | | | |  | | | |  |
| PHYS 2003 | | | | |  | | | | | | | | | | | |  | | | |  |
| PHYS 2004 | | | | |  | | | | | | | | | | | |  | | | |  |
| ECON 2002 | | | | |  | | | | | | | | | | | |  | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | |
| Enrollment/Employment Information | | | | | | | | | | | | | | | | | | | | | |
| How many hours will you be enrolled in for the upcoming semester? | | | | | | | | | | | | |  | | | | | | | | |
| Are you presently employed (either on or off campus)? | | | | | | | | | | | | | Yes If YES, where?  No | | | | | | | | |
| Approximately how many hours per week are you currently working? | | | | | | | | | | | | |  | | | | | | | | |
| Do you plan to continue working if selected as an SI Leader? | | | | | | | | | | | | | Yes  No | | | | | | | | |
| Please list any clubs, organizations, activities, etc…that you are currently involved in on campus: **(List the activity/organization and the average number of hours per week)** | | | | | | | | | | | | | | | | | | | | | |

|  |
| --- |
| **Please answer the following questions:**  **How did you hear about the SI Program?** |
| **List 2 strengths you have and that you feel are important as a potential SI Leader:** |
| **What specific study strategies do you practice in order to achieve academic success?** |
| **Discuss any previous/current experience you have and other characteristics that would enhance your interaction with students.** |
| **Are you comfortable speaking/facilitating group discussions to a large number of students (20 or more)? Briefly explain.** |
| **Pretend you are a student attending an SI session for the first time. What specific qualities and characteristics would YOU want your SI Leader to have if you were the student attending the session? In other words, describe what YOU would consider the “Ideal” SI Leader to be.** |

**Please read the information below carefully.**

If selected as an SI Leader, you will be required to attend a **MANDATORY** training session the week before classes begin. Group facilitated learning techniques, large group presentations, developing materials, and guidelines for keeping and submitting monthly paperwork will be discussed during this time.

**Duties and Responsibilities of ALL SI Leaders:**

**✓** Attend class lectures of a specific course section (3 hours/week).

**✓** Hold three 1-hour SI sessions each week.

**✓** Prepare session outlines and materials.

**✓** Maintain SI Moodle page

**✓** Attend required monthly training sessions

* Participate in professional development activities throughout the semester

**Due Date:**

All applications are due **Friday, April 5, 2019** to the Student Success Center.

My signature below attests that the information provided in this application is accurate and true to the best of my knowledge. I am aware of the duties and responsibilities of SI Leaders. I understand that placement as a Supplemental Instruction Leader is subject to budget approval.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature