

**DMACC Adult Literacy Center**  
**Literacy Coach Application**

Urban Campus Bldg 1, Room 110  
1100 7th St. Des Moines, IA 50314  
515-248-7517 [vmerrifield@dmacc.edu](mailto:vmerrifield@dmacc.edu)

Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_

City/State//Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Preferred Phone: home cell work  
(circle one)

E mail Address \_\_\_\_\_

Occupation (Present Job Title; or occupation before retirement) \_\_\_\_\_

\_\_\_\_\_ Length of employment \_\_\_\_\_

Age \_\_\_\_\_ 19-24 \_\_\_\_\_ 25-44 \_\_\_\_\_ 45-59 \_\_\_\_\_ 60 & over

Education \_\_\_\_\_ Degree \_\_\_\_\_

How did you hear about this volunteer opportunity? \_\_\_\_\_

What personal strengths do you have to be a tutor?

List and describe previous volunteer experience and length of time in each volunteer position.

What are your preferred days and times for tutoring? (Center closed on weekends)

\_\_\_\_\_  
\_\_\_\_\_

Do you prefer a male or female student, or is either OK? \_\_\_\_\_

Are you willing to work with an English Language Learner? Yes No

**Office use**

Assigned Student \_\_\_\_\_ Start Date \_\_\_\_\_

2/20