SUPPLEMENTAL INSTRUCTOR (SI)

JOB DESCRIPTION

What is Supplemental Instruction?
University 60 classes, Supplemental Instruction (SI), are peer-facilitated group study sessions designed to help students master difficult subject matter in classes with traditionally low pass rates. Students enroll to receive one unit. Sessions focus on understanding content while also developing effective study strategies, problem solving skills, and preparing for exams.

What are the Supplemental Instruction Leaders’ responsibilities?
SI leaders are responsible for attending class meetings for the selected (‘target’) course, developing engaging and interactive lesson plans for SI sessions, attending and facilitating those SI sessions, and attending strategizing team meetings.

What are the benefits of being an SI leader?
SI is a paid position. SI is also an opportunity for students to improve their communication skills, strengthen skills in a given academic subject, and gain professional experience. SI is a great opportunity for anyone who is interested in teaching.

What are the minimum criteria needed to apply?
- Sophomore, Junior, Senior, or Graduate students preferred  
- Have an overall GPA of 3.0 or higher  
- Have taken the course to be instructed and received a grade of B+ or better  
- Have excellent organizational, communication and interpersonal skills

How can I apply to become an SI leader?
1. Complete the following application.  
2. Attach a copy of your unofficial transcripts.  
3. Attach a copy of your class schedule for the semester you plan on working.  
4. Attach 2 recommendation forms (found at the end of this application).  
   - May be emailed by Professor directly to siandsmart@gmail.com  
5. Drop off completed application to Learning Resource Center (LRC) located on the 3rd floor of the Oviatt Library.

For more information contact:

Karen Abramowitz  
Supplemental Instruction & SMART Lab Coordinator  
E-mail: karen.j.abramowitz@csun.edu  
Phone: (818) 677-2033  
Learning Resource Center  
Oviatt Library 300 East Wing
**EMPLOYMENT APPLICATION**

**GENERAL INFORMATION**

<table>
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<tr>
<th>DATE APPLIED</th>
<th>STUDENT ID</th>
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<tbody>
<tr>
<td>NAME</td>
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<td>PERMANENT ADDRESS</td>
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<td>CITY/STATE</td>
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<td>PHONE</td>
<td>CELL PHONE</td>
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**ACADEMIC INFORMATION**

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<tr>
<th>MAJOR</th>
<th>EXPECTED GRADUATION DATE</th>
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<tbody>
<tr>
<td>MINOR</td>
<td>CLASS STANDING</td>
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<tr>
<td>GPA (Overall)</td>
<td>GPA (Major)</td>
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For which course(s) would you like to be an SI?

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<th>COURSES</th>
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**WORK STUDY**

A WORK-STUDY AWARD IS PREFERABLE, BUT NOT REQUIRED FOR EMPLOYMENT

Have you been awarded work-study funds?  YES _____  NO _____

If yes, how much per semester?  __________________________

**AVAILABILITY**

How many units are you taking or plan to take?  __________________________

How many hours would like to work?  __________________________

Are or will you be working elsewhere on campus?  YES _____  NO _____

If yes, how many hours?  __________________________

**FOR DEPARTMENTAL USE ONLY**

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<th>Interview Date:</th>
<th>Interview Time: _____ am/pm</th>
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<tr>
<td>Hired?</td>
<td>Yes ____  No ____</td>
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<tr>
<td>Completed Application</td>
<td>Class Schedule</td>
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<tr>
<td>Unofficial Transcript</td>
<td>Recommendation Form</td>
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To complete your application, submit the following:
A. TWO LETTERS OF RECOMMENDATION (Use the two forms attached to this application.)
B. A COPY OF YOUR OFFICIAL OR UNOFFICIAL TRANSCRIPTS.
C. A BRIEF WRITING SAMPLE

I hereby certify that all statements made are true to the best of my knowledge and belief. I understand that my stated pre-employment qualifications are subject to investi-gation and I hereby authorize the Learning Resource Center to investigate any and all information on this application. I understand that any false statements appearing on any employment form will be sufficient cause for immediate dismissal.

_________________________  ________________________
Signature of Applicant            Date
To Recommender:
As an SI Leader the applicant will provide services to CSUN students seeking help in the applicant’s subject area(s). Please complete this form and make any comments you deem appropriate.

You may return this form via email to siandsmart@gmail.com or via the applicant or campus mail (mail drop 8325). If you are off campus, address your letter to:

California State University, Northridge
Learning Resource Center
18111 Nordhoff Street
Northridge, California, 91330-8325

If you have any questions, please email Karen Abramowitz at karen.j.abramowitz@csun.edu or call (818) 677-2033.

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How long have you known the applicant and in what capacity?

________________________________________________________________________

Rate the student’s understanding of the material (circle answer):

EXCELLENT     GOOD     FAIR     POOR

Rate the student’s ability to communicate effectively (circle answer):

EXCELLENT     GOOD     FAIR     POOR

Additional Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Recommender’s Signature ___________________ Recommender’s Name ___________________ Title & Department ___________________
SUPPLEMENTAL INSTRUCTOR RECOMMENDATION LETTER

STUDENT NAME ________________________ STUDENT ID ________________________

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As an SI Leader the applicant will provide services to CSUN students seeking help in the applicant’s subject area(s). Please complete this form and make any comments you deem appropriate.

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Course(s) this student has taken from you:

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<th>GRADE</th>
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How long have you known the applicant and in what capacity?

_________________________________________________________

Rate the student’s understanding of the material (circle answer):

EXCELLENT GOOD FAIR POOR

Rate the student’s ability to communicate effectively (circle answer):

EXCELLENT GOOD FAIR POOR

Additional Comments:

_________________________________________________________

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Recommender’s Signature ________________________ Recommender’s Name ________________________ Title & Department ________________________