



**Communities in Schools Mentoring Project
MENTOR APPLICATION**

Personal Information:

Name _____ Gender Male Female
 First Middle Last

Address _____
 Street City State ZIP

Home phone _____ Cell phone _____

Texting? Y ___ N ___ E-Mail Address _____

Name/address of employer _____

Work phone _____ Occupation _____

Volunteer Information:

1. What do you feel are the strengths (bilingual, math skills, previous relevant volunteer experience, etc.) you can bring to this program?

2. Write a brief statement on why you have chosen to participate in the mentor program.

3. Initial the statements below:

_____ I understand that the mentor program involves spending one hour per week with an assigned student.

_____ I understand that I will be required to complete the mentor program orientation and at least three training updates during the twelve month period.

4. Yes No Within the past 10 years, have you been convicted of any felony or misdemeanor classified as an offense against a person or family, or an offense of public indecency or a violation involving a state/federally controlled substance?

5. Yes No Are you under current indictment or has a district/county attorney accepted an official complaint for any of the offenses in question #4?

6. If the answer is YES to questions 4 or 5, please explain below:

7. Educational Background (mark one):

- Some high school
- High school graduate
- Some college

- Graduate/professional school
- Technical school
- College graduate

8. Please list three references (include at least one family member, one personal friend and one work reference):

Name _____
Address _____
City _____ State/ZIP _____
Phone number _____
E-Mail _____
Relationship _____

Name _____
Address _____
City _____ State/ZIP _____
Phone number _____
E-Mail _____
Relationship _____

Name _____
Address _____
City _____ State/ZIP _____
Phone number _____
E-Mail _____
Relationship _____

What days of the week are you available to volunteer?

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

In making this application to be a volunteer, I understand that the Mentoring Initiative Program routinely performs background checks of all volunteers for the position of mentor for which I am applying. This check may be done on me if I sign below. If I fail to sign, it may be grounds for rejecting me as a mentor.

I certify to the best of my ability that the information provided on this application is true and accurate. I also understand that misinformation knowingly provided here, and on subsequent mentor application forms, is grounds for dismissal.

Signature

Date

Other Information:

1. Do you prefer working with a ___ Girl ___ Boy ___ No Preference
2. Do you prefer working with a quiet, reserved child or an outgoing child
___ Outgoing ___ Quiet ___ No Preference?
3. Do you prefer working with a student from a specific racial/ethnic group? ___ Yes ___ No
___ No Preference
If yes, please specify: _____
4. Do you speak a foreign language? _____ If yes, please specify: _____
5. What clubs or groups, if any, do you belong to?

6. My favorite subject in school was: _____ least favorite _____
7. What qualities would you like in a student?

8. What individual has served as a role model for you? Why?

9. What are your
 - favorite television shows? _____
 - favorite styles of music? _____
 - favorite sports? _____
 - hobbies? _____

10. Please put an X by the activities that you enjoy the most:
___ Writing
___ Reading
___ Problem Solving
___ Science Projects
___ Using Computers/Web Surfing
___ Texting
___ Arts and Crafts
___ Scrapbooking
___ Photography
___ Games – Board and Video
___ Career Exploration
Other _____