

The Mentoring Project of the Upper Valley

Mentor Application

Personal Information:

Date: _____

Name: _____ Social Sec. #: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ E-mail address: _____

Driver's license #: _____ Date of expiration: _____

Date of birth: _____

Employer: _____

Length of employment: _____ Supervisor's name: _____

Have you ever been convicted of a crime? _____ If "Yes" please explain: _____

Do you object to our agency running a background check on you? _____

Mentoring Information:

Why do you want to be a mentor? _____

Can you meet with a child once a week for an hour? _____

Do you have any previous experience volunteering or working with youth? _____

What times can you meet with your mentee?

After school: _____ what day(s) and times _____

Weekends: _____ what day(s) and times _____

Do you have hobbies or special skills? _____

What are your strengths? _____

What are your weaknesses? _____

What do you believe are the two or three most important things in a child's life for that child to grow into a healthy adult capable of living a meaningful life? _____

Do you see yourself working with a particular type or age of child? _____

Please indicate any subject you would find difficult in a mentor/mentee relationship. (For instance: a child who has been sexually abused, a young person who is actively questioning his or her sexual orientation, questions of substance use or abuse, a child who is in foster care.) _____

Confidential:

Do you use illegal drugs? Yes / No

Are there any pending criminal charges against you? Yes / No

Have you ever been convicted of a felony offense? Yes / No

(A conviction may not necessarily disqualify you.
Give offense, date and jurisdiction in space below.)

Have you ever been charged with child neglect or abuse? Yes / No

Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with working with children? Yes / No

Please explain: _____

References: Please list 3 people you have known for more than three years, other than relatives, whom we may contact for personal references. If you are currently employed, please list your supervisor (ideally) or another co-worker as one of your references. Also, if you have recently moved to this area, at least one reference should be local, even if the individual has known you for less than three years.

1. Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Telephone Day: _____ Evening: _____

2. Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail _____ Telephone Day: _____ Evening: _____

3. Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail _____ Telephone Day: _____ Evening: _____

Before a match can be made all references must be returned and a copy of your driver's license and proof of insurance must be given to the Coordinator.

Please read this carefully before signing:

The Mentoring Project appreciates your interest in becoming a mentor to a child. By signing below, you attest to the truthfulness of all information listed on this application.

I, _____, understand that this is an application for and not a commitment or promise of a volunteer opportunity. I agree to let The Mentoring Project of the Upper Valley confirm all information listed and to conduct reference checks and all permitted criminal records checks. I understand that I will be given an opportunity to challenge the accuracy of any information received that appears to implicate me in criminal activities. To facilitate this challenge, I will be told the nature of the information and the agency from which it was obtained. I further understand that until The Mentoring Project receives notification from that agency clearing me, my application will be deferred.

I agree to follow the program's policies and abide by its guidelines. I certify that I have and will provide information throughout the selection process, including on this application, that is true, correct and complete to the best of my knowledge and that I have not and will not with-hold any information that would unfavorably affect my application for a volunteer position.

I understand that information contained on my application will be verified and I release and agree to hold harmless from liability any person or organization that provides information to The Mentoring Project. I understand the misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position from The Mentoring Project or my termination as a volunteer.

I understand that all of the information given on this application remains confidential.

Signature of applicant

Date

Thank you for your interest!

Please return to: Nancy Jones, Mentoring Coordinator
The Mentoring Project of the Upper Valley
P.O. Box 237, Bradford, Vermont 05033
439-3562 H 802 222-1624 C

The Mentoring Project of the Upper Valley

Student/Mentor Interest Form

The Mentoring Project School does its best to match mentors and their young partners by interests. Please take some time and answer this inventory carefully. Thank you.

Please place an X in front of any activities that you have any interest in trying, continuing or watching. Leave all others blank.

SPORTS

- Archery
- Auto Racing
- Baseball
- Basketball
- Billiards
- Boating
- Bowling
- Cross Country Skiing
- Downhill Skiing
- Football
- Frisbee
- Golf (mini or regular)
- Handball
- Hockey
- Ice Fishing
- Martial Arts
- Ping Pong
- Racquetball
- Rollerblading
- Rowing
- Soccer
- Softball
- Swimming
- Tennis
- Track
- Volleyball
- Weight lifting
- Other

OUTDOOR

- Astronomy
- Aviation
- Bicycling
- Boating
- Camping
- Canoeing
- Farm Animals
- Fishing
- Gardening
- Go-carts
- Hiking
- Horseback riding
- Hunting
- Ice skating
- Jogging/running
- Motorcycling
- Nature study
- Picnicking
- Remote control cars
- Rock climbing
- Rodeos
- Sightseeing
- Sledding
- Snowmobiling
- Travel
- Walking
- Waterskiing
- Other

INDOOR

- Board games
- CD's
- Cards
- Chemistry
- Computers
- Coins
- Concerts
- Cooking
- Dancing
- Knitting
- Models
- Movies
- Museum
- Musicians
- Painting
- Photography
- Plays
- Quilting
- Reading
- Rocks
- Science
- Sculpting
- Sewing
- Singing
- Stamps
- Video Games
- Woodworking
- Other

