



2023-2024 Mentor Application

Directions: Please complete this form in its entirety. All fields are required.

Identification/Personal Background Information:

Name (First, Middle, Last): _____

Salutation: _____

Date of Birth: _____ Social Security #: _____

Driver's License #: _____

Employer: _____

Job Title: _____ Employment Start Date: _____

Career Field:

- Agriculture, Food, and Natural Resources
- Architecture and Construction
- Arts, Audio/Video Technology and Communications
- Business, Management, and Administration
- Education and Training
- Energy
- Science, Technology, Engineering, and Mathematics
- Finance
- Government and Public Administration
- Health Science
- Hospitality and Tourism
- Human Services
- Information Technology
- Law, Public Safety, and Security
- Manufacturing

- Marketing, Sales, and Service
- Military
- Transportation, Distribution, and Logistics

Are you a graduate of the Take Stock in Children program: Yes No

If yes, in what year did you graduate High School? _____ County? _____

How do you identify?

Gender: Female Male

Race: American Indian/Native American Asian Black/African-American
 Multiracial Pacific Islander/Hawaiian White
 Other _____

Ethnicity: Are you of Hispanic origin? Yes No

Additional Language(s) spoken: _____

Age: (check one): 18-30 31-40 41-50 51-60 61+

Are you married? Yes No

Do you have children? Yes No

If so, please tell us the following:

Children _____ Age(s) _____

Mentor Contact Information:

E-mail Address: _____

Cell Phone: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Work Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____

Location Preference:

- In School/In-Person Only Virtual Only Hybrid of In-Person and Virtual
 No Preference

**If available, would you prefer to mentor a student nearest your work or home address?
Check box options below:**

- I prefer to mentor a student nearest my home address.
 I prefer to mentor a student nearest my work address.
 I do not have a preference.

Highest education level completed (Check all that apply):

- some school, not a high school graduate GED high school graduate
 associate's degree
 technical/vocational certificate
 bachelor's degree
 master's degree
 doctorate
 other

Are you a first-generation college graduate*? Yes No
*(neither parent has earned a baccalaureate degree or higher)

Degree Field (Check all that apply):

- Agriculture, Food, and Natural Resources
 Architecture and Construction
 Arts, Audio/Video Technology and Communications
 Business, Management, and Administration
 Education and Training
 Energy
 Science, Technology, Engineering, and Mathematics
 Finance

- Government and Public Administration
- Health Science
- Hospitality and Tourism
- Human Services
- Information Technology
- Law, Public Safety, and Security
- Manufacturing
- Marketing, Sales, and Service
- Military
- Transportation, Distribution, and Logistics

Are you currently enrolled in any education or training program? Yes No

If yes, please specify: _____

Mentor Information:

How would you describe your communication style?

- friendly and outgoing usually wait to be approached by someone
- reserved until I get to know someone

I am interested in becoming a mentor because: (check all that apply)

- I think I'd be a positive role model I like children I have the time to give
- I overcame difficulties growing up and would like to help someone else
- I think I have the personality and abilities to be a good mentor
- I am interested in making a difference in the life of a child
- I believe in the value of mentoring I wish I had a mentor when I was a teenager

Do you have any specific training or experience in dealing with any of the following topics: (check all that apply, and if yes, then please explain.)

- College Admissions _____
- College Applications _____
- Communication _____
- Financial Literacy _____
- Financial Aid _____
- Health/Wellness _____
- Leadership _____
- Life Skills _____
- Persistence/Resiliency _____
- Personal Money Management/Budgeting _____
- Problem Solving Skills _____
- Self-Advocacy _____
- Study Skills _____
- Social Skills/Business Etiquette _____
- Time Management _____
- Other _____

List any clubs or organizations of which you are currently a member: _____

Are there any particular challenges you would prefer not to handle as a mentor?

Which of the following activities do you enjoy participating in or watching? (Check all that apply)

- Sports (specifically, _____)
- Handicrafts (specifically, _____)
- Outdoor Life Mechanics/Science Literature Pop Culture (Movies, TV, etc.)
- Music Collecting Other _____

Is there anything else you would like us to know about you? If yes, please explain:

The undersigned acknowledges and agrees that 1) the applicant is not obligated, if called upon, to perform the volunteer services herein applied for; 2) Take Stock in Children is not obligated to assign or actively seek to assign the applicant a Take Stock in Children student; 3) as part of the Take Stock in Children matching process, additional information may be requested from the applicant, and 4) Take Stock in Children reserves the right at all times to terminate any match between any volunteer mentor and student for whatever cause.

I declare that all of the statements made in this application are true, complete and correct to the best of my knowledge.

Applicant's Signature

Date

As a mentor in the Take Stock in Children program, I will always act in a behavior that is in the best interest of my student. Accordingly, I pledge to each of the following volunteer policy statements.

Please initial your approval next to each statement.

____ I will adhere to all volunteer policies of my local school district.

____ I will notify Take Stock in Children if I must terminate my mentor position for any reason.

____ I will notify my student or their school liaison or the Take Stock in Children College Success Coach if I am unable to attend a previously scheduled mentoring session.

____ I will not willfully arrange unmonitored contact with my student or without the supervision of Take Stock in Children or school officials.

____ I will not drive my student in my car.

____ I understand that Take Stock in Children will terminate my relationship with my student if I violate any of the above policies.

REFERENCES

Please print COMPLETE name, address, and relationship of three people. They must have known you for at least 2 years. Each should be in a position to evaluate your qualifications as a mentor. Please do not include family members, current boyfriends, girlfriends, or fiancées as references.

Name	Address	Zip Code	Phone #
1. _____			
Relationship _____		Years Known _____	
2. _____			
Relationship _____		Years Known _____	
3. _____			
Relationship _____		Years Known _____	

If you are currently employed, please print the name and address of your work supervisor. If employed less than 6 months, the previous employer.

4. _____			
Address		Zip Code	Phone #

Liability Release/Consent for Release Information

I do hereby affirm the above information is true. I understand if denied acceptance into a mentoring program, no reason for denial will be given. I hereby consent to (local program) to release information to other entities, agencies, or individuals. I hereby release Take Stock in Children from any liability whatsoever for any information released or any acts or omissions connected with this application. I understand and consent to Take Stock in Children examining any and all available records or information from any source, to include but not be limited to criminal records.

I hereby allow Take Stock in Children to release any information compiled from my interview, references, or other sources pertaining to my application to become a mentor to Take Stock in Children. Take Stock in Children will use this information for the purpose of evaluating my ability to meet the initial criteria to serve as a mentor with a mentoring agency. I hereby release Take Stock in Children from any liability, debt, claim, suit, or obligation of any nature whatsoever should any information be obtained by any other individual, party, or entity of any nature whatsoever.

Signature	Date	Please print your name here.
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