



Mentor Application

Confidential Application for Volunteers
(Please print or type all information)

Name: _____ Birthdate _____

Ethnicity: _____ Marital Status _____

Number of Children _____ Ages of Children _____

Name of Employer: _____ Occupation: _____

Work Address: _____

Work Phone: _____ Supervisors Name: _____

On a separate sheet of paper please list previous employers and addresses if not in your current position for less than 5 years or submit a copy of most recent resume.

Home Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Best time to be contacted: _____ May we call you at work? _____

How did you hear about the TEAM program? _____

Have you been convicted of a crime or are you currently released on bail, or your own recognizance for any crime? _____

If so on a separate sheet of paper list the dates and charges of which you were convicted.

Do you currently have any criminal charges pending against you? _____ If so please describe them on a separate sheet of paper.

Have you ever been a mentor? _____
If so where and how long? _____

Why do you want to become a mentor? _____

What would be the best day and time for you to mentor?

To help us match you with a student please check all activities, interests and write in or circle specifics:

- Sports _____
- Outdoor Activities _____
- Games (board, card, video, chess etc.) _____
- Arts & or crafts _____
- Computers & technology _____
- Other interests _____

Please list the names and complete addresses of three unrelated references, one of which is a work related reference. (References will have known you at least 2 years and are willing to discuss your character, reputation, and ethics.)

1. Ms./Mr. _____
Name Address City/State/Zip

Business (if a business reference) _____ Phone: _____

2. Ms/Mr. _____
Name Address City/State/Zip

Business (if a business reference) _____ Phone: _____

3. Ms/Mr. _____
Name Address City/State/Zip

Business (if a business reference) _____ Phone: _____

The above information is true to the best of my knowledge. I understand that I am not obligated, if called upon, to perform volunteer mentor services herein applied for, and that the agency is not obligated to assign, or actively seek to assign, a student to the applicant. I further acknowledge that the submission of an application does not guarantee my volunteer position therefore all decisions made by the application committee will be deemed final without explanation. In the event that I am chosen to mentor a youth, I agree to the commitment and to participate to the best of my ability. I will honor confidential information regarding my student. I will be free of the influence of alcohol or illegal substances while in the presence of the protégé. I further agree to allow the staff of Perry School, Inc and TEAM program to elicit additional pertinent, personal information as part of the matching process. I will inform the Project Coordinator of any changes in my address, phone numbers and inform the Project Coordinator in advance should I stop mentoring.

Mentor Signature _____ Date _____

Do you know someone else who might be interested in being a mentor?

Name _____

Address _____

Phone Number _____

Please return to:

Corey V. Poole, Project Director TEAM

128 M St NW suite 230 Washington, DC 20001

(202) 312-7159 office

(202) 312-7145 fax

email address cpoole@perryschool.org

Perry School Inc., does not discriminate on the basis of race, creed, educational level, physical disability, age, gender, sexual orientation, or marital status.