

One2One Mentoring

Mentor Application

This information will be kept confidential.

Name: _____ Address _____

City: _____ Zip _____ Home Phone: _____ Email: _____

Birth Date: _____ Gender: _____ Ethnic _____

Background: _____

Marital Status: _____ Single _____ Married _____ Divorced _____ Spouse's Name: _____

Name(s) and Age(s) of Children: _____

Occupation: _____ Employer Name _____

Employer's Address and Phone Number _____

Would you agree to have us check your name through federal and state criminal records of child abuse and neglect proceedings? (Please circle ONE) YES NO

Social Security Number: _____ Drivers License Number/State: _____

Have you ever been convicted of:

A misdemeanor involving behavior related to drugs, alcohol, or violence? _____

You can email a completed application to: Jackie@Ihope4u.com You may fax to: (937)525-0278
Mailing address: PO Box 3112, Springfield, Ohio 45501

A
felony: _____

Examples of past volunteer experience.

In a short paragraph, describe yourself. Please include personality traits, interests, and sense of morality.

How do you believe you could have a positive influence upon a young person?

What motivates you to take an interest in an at-risk youth?

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List three people who can serve as a character reference for you. Please list a reference from your current or most recent employer, and if possible, your current pastor.

1) Name _____ Relationship _____
Address _____ City _____ State and Zip _____
Phone _____ Length of
Acquaintance _____

2) Name _____ Relationship _____
Address _____ City _____ State and Zip _____
Phone _____ Length of
Acquaintance _____

3) Name _____ Relationship _____
Address _____ City _____ State and Zip _____
Phone _____ Length of
Acquaintance _____

If you agree to become a mentor, you will be asked to fulfill the following requirements:

- 1 To commit to serving as a mentor for at least one year.

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- 2 To maintain weekly contact with your mentee in person, by phone if absolutely necessary
- 3 To be a dedicated and dependable in being a positive role model for your mentee.
- 4 To complete monthly mentor-mentee meeting summary.
- 5 To provide One2One Mentoring with a copy of your drivers license and proof of insurance.

I certify that the information I have supplied is correct to the best of my knowledge. I give permission to contact the references provided. I give permission to complete a release of my motor vehicle records through Background Information Services.

Signature _____

Date _____