



2020-2021 Mentor Application

EQUAL OPPORTUNITY POLICY

Take Stock in Children is an equal opportunity organization and complies with all applicable federal, state, and local non-discrimination laws. Take Stock in Children strictly prohibits and does not tolerate discrimination against students, mentors, applicants, or any other covered persons because of race, color, religion, creed, national origin or ancestry, ethnicity, sex (including pregnancy), sexual orientation, gender (including gender nonconformity and gender identity), marital status, age, physical or mental disability, citizenship, past, current, or prospective service in the uniformed services, genetic information, or any other characteristic protected under applicable federal, state, or local law. All Take Stock in Children employees, other workers, and representatives are prohibited from engaging in unlawful discrimination. Take Stock in Children will reasonably accommodate qualified individuals with a disability as required by law. Take Stock in Children will also, where appropriate, provide reasonable accommodations for an individual's religious beliefs or practices. Finally, no one will be subject to, and Take Stock in Children prohibits, any form of discipline, reprisal, intimidation, or retaliation for good faith reports or complaints of incidents of discrimination of any kind, pursuing any discrimination claim, or cooperating in related investigations.

Identification/Personal Background Information:

Name (First, Middle, Last): _____

Salutation: _____

Date of Birth: _____ Social Security #: _____

Driver's License #: _____

Employer: _____

Job Title: _____ Employment Start Date: _____

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

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

Are you a first-generation college graduate? Yes No

How do you identify?

Gender: Female Male Gender Diverse

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

Ethnicity: Are you of Hispanic, Latino, or Spanish 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:

sons _____ Age(s) _____

daughters _____ Age(s) _____

Mentor Contact Information:

Home Address: _____

City, State, Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail address _____

Highest education level completed (Check all that apply):

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

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 new
- reserved until I get to know someone new

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) he or she 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 her or him 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 his or her 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. _____	_____	_____	(____) _____
Name	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.