



MENTORING APPLICATION

Date: _____

Legal Name: _____

DOB: _____

Address: _____

Email: _____

Home: _____ Work: _____ Cell: _____

Best time to contact you? _____ Are texts okay? Yes No

Drivers License Number: _____

Exp Date: _____

Education:

_____ High School

_____ Some College

_____ Trade/Vocational

_____ Bachelors

_____ Masters

_____ Doctorate

Employer: _____

Position: _____ Address: _____

Special Skills or Training: _____

Are you bilingual? _____

Please list three references **including email and phone number so that we may contact them (no relatives):**

Name: _____ Relationship to you: _____

Email: _____ Phone: _____

Name: _____ Relationship to you: _____

Email: _____ Phone: _____

Name: _____ Relationship to you: _____

Email: _____ Phone: _____

Emergency Contact: _____ Phone: _____



Statement of Agreement

Please fill out the form below. A criminal background check is also required as a precautionary measure in protection of the Aspire Mentoring Program, the children/families we serve, and the city of Longview. That form will be completed at New Mentor Orientation.

Read each statement, check the box, and indicate agreement by your signature below.

I agree not to consume, use, possess, or be under the influence of any drug or alcohol products while volunteering for the City of Longview.

I understand that any conduct or pattern of conduct that would tend to disrupt, diminish, or otherwise jeopardize public trust in the City of Longview will result in dismissal.

I understand that my volunteer assignment with the City of Longview may be terminated at any time.

I understand that depending upon the nature of the volunteer assignment, the City of Longview may deem it necessary to obtain a Driver's License Record and/or a Criminal Conviction History and Wanted Information Reports on individuals volunteering for the City of Longview. I hereby consent to the City of Longview to make any requests for a Drivers License Record, a Criminal History Report, and/or a Wanted Information Report on me. I release, relinquish, and remise the City of Longview, its employees, agents, and representatives, from any and all causes of action or liability which I may have or which arise out of, or as a result of, the reports herein authorized. Furthermore, I understand that my failure to execute this informed consent will result in my not being further considered for employment or volunteerism.

I have NOT been convicted and/or placed on probation for any criminal offense. If you HAVE been convicted and/or placed on probation, please list date and nature of offense.

List any states you have lived in besides Texas and how long you resided there:

SIGNATURE: _____ DATE: _____

FULL NAME (Please Print): _____



MENTOR SURVEY

This information will help us know more about you and allow us to match you with a compatible Mentee.

Name: _____ Ethnicity: _____

Gender: Male Female Non-binary Prefer not to answer

Marital Status: _____ Spouse/Partner Name: _____

Do you have children living at home? If so, what are their grades and schools?

Select the times and days that would be convenient for you to meet with your Mentee.

_____ Monday	_____ Tuesday	_____ Wednesday
_____ Thursday	_____ Friday	_____ Weekends
_____ Lunchtime	_____ Evening	

Please list preferred School District(s): _____

Please list preferred Campus(es): _____

Which age group are you interested in working with? Select all that apply:

_____ Elementary: Grades K-5
 _____ Middle/JH: Grades 6-8
 _____ High School: Grades 9-12

Would you have any concerns about working with:

_____ a very active child	_____ child with ADHD
_____ child of a different race	_____ overweight child
_____ child with a learning disability	_____ child with emotional problems
_____ child with behavior problems	

Would you describe yourself as:

_____ outgoing	_____ athletic/enjoys sports	_____ shy
_____ friendly	_____ outdoorsy/enjoys nature	_____ quiet
_____ musical/theatrical	_____ prefers indoor activity	_____ laid back
_____ high energy	_____ computer/tech enthusiast	_____ other

Hobbies/Interests: _____

Please state why you'd like to become a mentor: _____
