



Mentor Profile Sheet/Application

General Information

Name: _____ Date of Birth: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cellular phone: _____

Work phone: _____ Email address _____

Preferred means of contact: Home phone Cell phone Work phone Email

Best time to reach you by phone: _____

Male Female Ethnicity: _____

Driver's License info: State _____ DL# _____

Employer: _____ Occupation: _____

Contact Person _____ Phone: _____

Previous Employer: _____ Occupation: _____

Previous Employer: _____ Occupation: _____

Do you have any previous experience volunteering or working with youth? _____, if so, please explain. _____

Character References/Contacts (please do not list relatives)

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____



MENTOR INTEREST SURVEY

Please complete all the following. This survey will help PIE Mentoring Program know more about you and your interests and help us find a good match for you. Please check the program that best fits your interest.

- School - Based Mentoring:** The PIE School- Based Mentoring program allows the mentor and student to meet for one hour a week during the school day during the student's P.E. or Elective class. The students in this program attend Montgomery Public Schools and are between the ages of 9 and 15 years old. The goals of the program are to provide students with mentors who help promote character building and positive attitudes toward school. The program commitment is one year.

Please circle your best possible day: M__ T__ W__ TH__ F__

School Location Preference (1-5/ one being first choice):

Elementary: Carver____ E.D. Nixon____ Davis ____ Floyd____

Middle/Jr. High: Bellingrath ____ Goodwyn ____ McIntyre____ Southlawn ____McKee ____

- Community-Based Mentoring:** The PIE Community Based Mentoring program allows the mentor and student to meet 3-4 times (4-10 hours) monthly beyond the school environment. The students in this program are between the ages of 9 and 15 years old and attend Montgomery Public Schools. This program offers opportunities for in-depth relationship building with the mentee and parents while incorporating the family's needs, community involvement, and playful activities. The program commitment is one year.

School Location Preference (1-5/ one being first choice):

Elementary: Dozier____ Head____ Harrison ____ Morningview ____

Middle/Jr. High: Bellingrath ____ Goodwyn ____ McIntyre____ Southlawn ____ Capitol Heights ____

Please indicate the group(s) you are interested in working with:

Anglo____ African American ____ Asian ____ Latino ____ Native American ____ Other ____

Are there certain characteristics you would like your mentee to have? If so, please list here: _____

Would you be willing to work with a child who has disabilities? _____ if so, please specify disabilities

you would be willing to work with. _____

Would you be willing to work with a child who is gay/lesbian/transsexual? _____

Do you speak any languages other than English? _____ If so, which languages? _____

Circle any of the words below that you think describe your personality.



quiet
talkative
confident

shy
friendly
spiritual

nervous
insecure
sensitive

withdrawn
Inquisitive
happy

outgoing
adventuresome
moody

Write a sentence about what you were like in elementary and junior high. _____

What are some favorite things you like to do with other people? _____

What are your favorite subjects to read about? _____

What is your job and how did you choose this field? _____

What is one goal you have set for the future? _____

If you could learn something new, what would it be? _____

If you could teach something new, what would it be? _____

What person do you most admire and why? _____

Why are you interested in being a mentor? _____

What would you like to get out of being a mentor? _____

Do you sincerely feel you are able to make at least a one-year commitment and the contact hours required for your program of choice? Please write your initials next to your answer.

_____ Yes _____ No

Would you be willing to be a mentor until the student graduates? Please write your initials next to your answer.

_____ Yes _____ No



Hobbies and Interests Please rate your level of interest in each of the following activities, with 1 indicating no interest and 5 indicating very strong interest.

ACTIVITY not at all interested very interested

Watching a movie	1	2	3	4	5
Going to a play	1	2	3	4	5
Playing sports	1	2	3	4	5
Watching a sporting event	1	2	3	4	5
Reading	1	2	3	4	5
Writing	1	2	3	4	5
Exercising	1	2	3	4	5
Just hanging out	1	2	3	4	5
Talking	1	2	3	4	5
Playing with animals	1	2	3	4	5
Playing games	1	2	3	4	5
Learning new things	1	2	3	4	5
Going to the library	1	2	3	4	5
Visiting a museum	1	2	3	4	5
Going to a concert	1	2	3	4	5
Playing an instrument	1	2	3	4	5
Singing	1	2	3	4	5
Dancing	1	2	3	4	5
Acting	1	2	3	4	5
Drawing or painting	1	2	3	4	5
Sculpting	1	2	3	4	5
Photography	1	2	3	4	5
Cooking	1	2	3	4	5
Eating dinner at a restaurant	1	2	3	4	5

Doing church activities	1	2	3	4	5
Traveling	1	2	3	4	5
Camping and hiking	1	2	3	4	5
Fishing	1	2	3	4	5
Helping a youth with schoolwork	1	2	3	4	5
Helping a youth find a job	1	2	3	4	5
Helping a youth work on a résumé	1	2	3	4	5
Helping a youth find out about college	1	2	3	4	5
Helping a youth learn about technical school	1	2	3	4	5
Teaching a youth about money	1	2	3	4	5
Showing a youth how to make a budget	1	2	3	4	5
Teaching a youth to balance a checkbook	1	2	3	4	5
Teaching a youth about credit cards	1	2	3	4	5
Helping a youth get a driver's license	1	2	3	4	5
Bargain hunting	1	2	3	4	5
Shopping	1	2	3	4	5
Fixing things	1	2	3	4	5
Doing volunteer projects	1	2	3	4	5
Helping out younger children	1	2	3	4	5
Teaching someone a new skill	1	2	3	4	5
Thinking and talking about the future	1	2	3	4	5



We appreciate your interest in becoming a mentor!

Please read each statement carefully. Initial each of the following:

_____ I agree to follow all PIE Mentoring program guidelines and understand that any violation will result in suspension and/or termination of the mentoring relationship.

_____ I understand that PIE Mentoring Program is not obligated to provide a reason for their decision in accepting or rejecting me as a mentor.

I give consent for PIE to use any photographic images taken of me while participating in the mentoring program for promotional purposes or other related marketing materials.

_____ Yes _____ No

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions. You authorize Partners In Education to confirm all information listed and to conduct federal and state records checks. All records will remain confidential and used solely for program purposes.

I understand I must return the completed application and all items below. Incomplete information will delay the application process.

- **Copy of your valid driver's license**
- **Information Release Form**
- **ABI Form**

I understand the role of a mentor carries with it important responsibilities. If accepted as a PIE mentor, I agree to make a time commitment of a least one hour per week for 1 year.

Volunteer Signature

Date

Please return this application by mail and the items listed above to Sonya Stallworth, Program Director, Partners In Education, 1153 South Lawrence Street, Montgomery, Alabama 36104.

(This section is to be completed by the Partners In Education selection committee)

A D (if D, provide reason): _____

(PIE Staff authorized signature) _____



Information Release

Have you ever been charged with or convicted of any felony or misdemeanor? (Please note that a "yes" answer to this question will *not* automatically disqualify you from consideration.) If "yes," please describe briefly _____

I, _____, understand it will be necessary for PIE Mentoring Program to conduct a background check regarding my driving record, criminal history, personal references, and employment.

I authorize PIE Mentoring Program to obtain any needed information regarding my driving record, legal/criminal history, character references, and employment from any state or federal agency, my employer, and personal references for the purposes of participating in a mentoring program. Further, I provide permission for PIE Mentoring program to conduct the same investigation of my background in previous states in which I have resided.

Further, I understand that information about me will be anonymously (without my name) shared with a prospective mentee(s) and his/her parent(s)/guardian(s) to aid in determining a suitable match. Once a mentor/mentee match is determined, my identity and any other relevant information known about me may be shared with the mentee and parent/guardian to ensure and aid in facilitating a safe and successful match relationship.

Signature Date

Full Name _____

Address _____ City _____ State _____ Zip _____

Date of Birth ____/____/____

Social Security Number ____/____/____

Current Driver's License No. _____ State: _____

Please list any other cities, states, and dates of residency during the past 10 years.

_____ City	_____ State	_____ From (m/year)	_____ To (m/year)
_____ City	_____ State	_____ From (m/year)	_____ To (m/year)
_____ City	_____ State	_____ From (m/year)	_____ To (m/year)
_____ City	_____ State	_____ From (m/year)	_____ To (m/year)