



Mentor Application

Personal Information

Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ Cell Phone: _____

E-mail: _____

Date of Birth: ___/___/___

Highest Completed Education Level: _____

Please list all colleges/universities from which you earned degree(s):

How did you hear about MOSTe?:

Current Employment Information

Employer: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Length of Time with Employer: _____

Position Held: _____

General Information

1. Why do you want to be a mentor?
2. Do you have any previous experience working with youth? If so, please specify.
3. What qualities, skills or other attributes do you feel you have that would benefit a youth? Please explain.
4. Can you commit to participate in MOSTe for a minimum of one academic year from the time you are matched with a scholar?
5. Are you available to meet with a potential mentee(s) for four hours per month and have contact at least twice a month? Please explain any particular scheduling issues.

6. How would you describe yourself as a person?

7. How would your friends, family and co-workers describe you?

8. Please describe your general health. Are you currently under a physician's care or taking any medications that we should be aware of? If yes, please explain.

9. Have you ever been arrested, convicted of a felony or used any illegal substances? If yes, please explain.

10. Have you ever been convicted of a DUI? If yes, please explain.

11. Have you ever received treatment for alcohol or substance abuse? If yes, please explain.

12. Have you ever been treated or hospitalized for a mental disorder? If yes, please explain.

13. Have you ever been investigated or convicted of child abuse or neglect? If yes, please explain.

14. Have you ever been investigated or convicted of sexually abusing or molesting a youth 18 or younger? If yes, please explain.

15. Are you willing to communicate regularly and openly with program staff, provide monthly information regarding your mentoring activities, and receive feedback regarding any difficulties during your participation in the mentoring program?

16. Are you willing to attend an initial three-hour mentor training session prior to being matched?

17. MOSTe operates in six regions of Los Angeles County, designated below by middle schools:

- a. George Washington Carver Middle School 4410 McKinley Ave, Los Angeles, CA 90011
- b. Samuel Gompers Middle School 234 E 112th St, Los Angeles, CA 90061
- c. Johnnie L. Cochran, Jr. Middle School 4066 Johnnie Cochran Vista, LA, CA 90019
- d. Edwin Markham Middle School 1650 E 104th St, Los Angeles, CA 90002

- e. Los Angeles Leadership Academy 2670 Griffin Ave, Los Angeles, CA 90031
- f. Wilson Middle School 300 Madre St, Pasadena, CA 91107

Do you have a preference with respect to which school/region you will be assigned? If yes, please indicate preference.

18. Is there any type of student you do not want to work with? If yes, please explain why.

Please read this carefully before signing:

MOSTe appreciates your interest in becoming a mentor.

Please initial each of the following:

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

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

_____ I authorize MOSTe 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.

_____ I release MOSTe of all liability of injury, death, or other damages to me that may result from my participation in the program, including but not limited to transportation, and hold harmless any MOSTe program staff, or other representatives, both collectively and individually, of any injury, physical or emotional, other than where gross negligence has been determined.

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

_____ (optional) I agree to allow MOSTe to use any photographic image of me taken while participating in the mentoring program. These images may be used in promotions or other related marketing materials.

I understand I must return all of the following completed items along with this application, and that any incomplete information will result in the delay of my application being processed:

- Copy of your valid driver’s license and proof of auto insurance
- Personal References Form
- Interest Survey Form
- DMV Driver Record Request
- Live Scan Form (state agency form)

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

Signature _____ Date _____

Personal References

Please list the names and phone numbers of three people you would like to use as character references (only people you have known for at least a year). Any information MOSTe gathers from these references will be held as confidential and not released to you, the applicant.

Name: _____

Email Address: _____

Phone: _____

Relationship: _____ How long known: _____

Name: _____

Email Address: _____

Phone: _____

Relationship: _____ How long known: _____

Name: _____

Email Address: _____

Phone: _____

Relationship: _____ How long known: _____

Mentor Interest Survey

Name: _____ Date: _____

Please complete all the following. This survey will help MOSTe know more about you and your interests and help us find a good match for you.

Please indicate age group(s) you are interested in working with: Age: 11–14 15–18

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

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?

What person do you most admire and why?

Describe your ideal Saturday:

List current and past club/organization affiliations:

- 1.
- 2.
- 3.
- 4.
- 5.

Please list some of the activities you are interested in:

- 1.
- 2.
- 3.
- 4.
- 5.