

MENTOR APPLICATION

Name: _____ Date of Birth: _____

Home Address: _____

Home Telephone: _____

Employer: _____

Occupation: _____ Title: _____

Work Address: _____

Work Telephone: _____

Cellular Phone: _____ Fax: _____

E-mail: _____

Preferred Mailing Address: Work Home Preferred Contact Number: Work Home Cell

CLEARANCE INFORMATION

Do you have a valid driver's license? Yes No Do you have car insurance? Yes No

Have you ever been convicted of a felony or misdemeanor? Yes No

Are you under current indictment or has a district/county attorney accepted an official complaint for any criminal offenses? Yes No

All applicants must complete the Criminal Record Check and the Child Abuse Clearance. In addition, if you have not lived in Pennsylvania continuously for the last ten years, you must complete an FBI Fingerprint-based Background Check.

Please list the names and telephone numbers of two professional or personal references and describe their relationship to you:

(1) Name _____ Phone Number _____

Email Address _____ Relationship _____

(2) Name _____ Phone Number _____

Email Address _____ Relationship _____

PERSONAL PROFILE

College(s) Attended: _____

Degree(s) Attained (B.A., M.S., etc.) and Year(s) Graduated: _____

Major(s): _____

Volunteer and Community Activities: _____

Please check the activities and interests that apply to you:

Playing Sports (please specify) _____

Attending Sporting Events (please specify) _____

Arts Business Computers Nature/Outdoors

Reading/Writing Running/Fitness Community Service Music

Other: _____

When you were 15, what did you want to be when you grew up? Why? _____

Who or what was the biggest influence on your decision to attend college? Please briefly describe this influence and its impact on you. _____

What do you specifically hope to offer a high school student in a mentoring relationship?

Please describe any limitations or restrictions to the time you are available for mentoring responsibilities.

Do you have any transportation restrictions? (If yes, please explain.)

What are three special talents, skills or areas of expertise that you would like us to know about you?

1. _____
2. _____
3. _____

Do you have any specific strengths (language skills, math skills, reading skills, etc.) that would be helpful for us to consider in matching you with a student?

MENTOR RESPONSIBILITIES

I understand that the Sponsor-A-Scholar ("SAS") mentor expectations include the following key points:

- My official commitment to the SAS mentoring relationship begins when I am matched with my student and continues until my student completes his or her first year of college.
- The SAS Program requires that I complete an orientation and requests that I attend at least two training sessions/mentor roundtables during the year.
- SAS Mentoring involves at least a weekly phone call and a monthly visit with the student.
- I give Philadelphia Futures permission to use my name and photograph in its publications.

I certify to the best of my ability that the information provided on this application is true and accurate.

Signed: _____

Date: _____

Please fax or mail this form, along with a copy of your résumé, to:

Manager, Volunteers and Special Projects • Philadelphia Futures
230 South Broad Street - 7th Floor • Philadelphia, PA 19102
215-790-1666 • Fax 215-790-1888
www.philadelphiafutures.org • <http://twitter.com/phillyfutures>