Mentor Application

REGAL Ladies/ROYAL Men Mentoring Program

Today's Date _____

Contact Information

Last Name _____ First Name_____

Birth Date _____ Email_____

Home Address _____

City _____ State _____ Zip _____

Business Name

_____

Business Address

_____

City _____ State _____ Zip_____

Job Title:

_____

Description of Duties:

_____

Level of Education: _____

Driver's License #: _____

Home Phone #:_____ Work Phone #: _____ Cell Phone #:_____

Are you able to agree to at least a one year mentoring commitment? Yes No

This includes:

♦Speaking with your mentee at least once a week
♦Planning a social outing with your mentee at least once a month
♦Attending Events with your mentee (quarterly)

Do you have volunteer/ work experience with students or children? Yes No

If yes, please explain:

_____

_____

_____

What college(s) did you attend?

_____

_____

Major(s):_____

Briefly list current and past work experience:

_____

_____

_____

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

If yes, please attach explanation of when, where, and disposition of case(s).

_____

_____

_____

Do you speak a foreign language? Yes No

Language(s): _____

List any other interest or hobbies:

_____

_____

_____

Are you affiliated with any other programs or organizations (sororities, clubs, etc.)?

_____

_____

_____

Please provide two references:

1. _____ Phone: _____
2. _____ Phone: _____

Describe special interest/hobbies, which may be helpful in matching you with a mentee. (i.e. cooking, crafts, sports, computers, art, music, etc.)

_____

_____

_____

_____

_____

Mentor Release Statement

I, the undersigned, hereby state that if selected as a mentor, I agree to abide by the rules and regulations of the REGAL/ROYAL mentoring program. I understand that the mentoring program involves spending a minimum of two hours per month at the assigned location. Further, I understand that I will attend a training session, keep in regular contact with my mentee, and communicate with staff regularly during this period. I am willing to commit to one year in the program and then will be asked to renew for another year.

I have not been convicted, within the past 10 years, of any felony or misdemeanor classified as an offense against a person or family, a public indecency, or a violation involving a state or federally controlled substance. I am not under current indictment.

Furthermore, I hereby fully release, discharge, and hold harmless the mentoring program, participating organizations, and all of the foregoing employees, officers, directors, and coordinators from any and all liability, claims, cause of action, costs, and expenses which may be or may at any time hereafter become attributable to my participation in the program.

I understand that the mentoring program staff reserves the right to terminate a mentor from the program. The program takes place within the confines of the program's policies and does not encourage or approve of relationships established between mentor/mentee and family members beyond the organized and supervised activities of the program. I give permission for the program staff to conduct a criminal background check as part of the screening for entrance into the program. This includes verification of personal and employment references as well as a criminal check with the local authorities. I understand that the agencies to be contacted may include employers, courts, law enforcement, social services, and any other persons or agencies with whom I have had contact.

Program staff has final right of acceptance of an applicant into the mentoring program and reserves the right to terminate a mentor from the program at any time. I also agree to allow program staff to release my photo and or likeness for promotional purposes.

NOTE Requirements include, but are not limited to:

- Background check
- Check of references
- Copy of DMV printout and auto insurance
- Personal interview

Confidentiality

All the information you are told about your mentee is confidential and sharing that information with others is prohibited. However, you are required to report certain things. Do promise a student that you will keep confidential information secret. Tell the student that he is free to share confidential information with you but that you are required to report certain things. It is critical, not only for the welfare of the mentee, but also to protect yourself and the organization, that you adhere to these exceptions:

1. If a student confides that he or she is the victim of sexual, emotional, or physical abuse, you MUST notify Eric Jamison II immediately. Please keep a note of the date and time this information was given to you. Remember, you should not disclose this information to anyone else, as it can be critical to the survival of the child.

2. If a mentee tells you of his involvement in any illegal activity, you MUST tell Eric Jamison II immediately. Again, please be sure to note the date and time.

Summary

These procedures are designed to protect the mentees from harm and to prevent even then appearance of impropriety on the part of the mentoring program and it's participating entities, mentors, volunteers, and mentees. One accusation could, at the very least, seriously damage the reputation of all those participating and endanger the mentoring program.

Please know that we appreciate your participation in the mentoring program and that we appreciate your adherence to these procedures. If you have any questions, please call Eric Jamison II at (443)379-9396 or email BaltimoreROSE@gmail.com.

I have read, understand, and agree to strictly abide by the mentoring program Mentor/Volunteer Procedures. I understand that the failure to adhere to these procedures may result in my removal from participation in the program.

I certify that all statements in this application are true and accurate.

Print Name _____ Signature _____ Date _____

Please be sure to include your $35 application fee. THANK YOU!