# Leaders Changing the System

# **Mentor Application**

To begin filling out this application, simply write inside the white space of the cells below and enter your applicable information. Once you are finished, please send your completed application via email to: Info@partnershipsforpermanence.org or mail to Partnerships for Permanence: 445



## **BACKGROUND INFORMATION**

Minnesota Street Suite 1500 St. Paul, MN 55101

Full Name:

Email:	Phone Number:
Are You Currently Employed?	
If Yes, Where are You Employed?	Current Employment Title:
If No, Where Were You Last Employed?	Previous Employment Title:

Do you have any past mentoring experience?

\*Past mentoring experience is not required, but your answer may help us during the mentor-matching process.

#### **INTEREST QUESTIONS**

Why are you interested in being a Volunteer Mentor?

What strengths would you bring as a Volunteer Mentor?

What do you hope to gain from our mentoring program?

### SECONDARY QUESTIONS

\*Please check all that apply. All volunteer mentors must commit to in-person bi-monthly informal gatherings with their mentee and annual P4P gathering and training opportunities.

	In-Person		Phone Call		Texting		Email		Skype		
How did you hear about P4P's Youth Mentor Program? (Please Circle)											
Attended an event		E	Business card	Flyer or Brochure			Recommendation				
Social Media		V	Vebsite	Other							
Were you in foster care or adopted? (Please Circle)											
Yes			No		Prefer not to answer						
Have you ever been convicted of a felony for violence, dishonesty, or theft? (Please Circle) *You will not automatically be rejected if the answer is yes.											
Yes			No				Prefer not	to answer			
If selected for LCS, are you willing to submit to a pre-training drug screening? (Please Circle) *You will not automatically be rejected if the answer is no.											
Yes			No				Prefer not	to answer			
If selected as a Volunteer Mentor, are you willing to submit to a background check? (Please Circle) *You will not automatically be rejected if the answer is no.											
Yes			No				Prefer not	to answer			
SIGN	ATURE										

By signing my name below, I certify that my answers are true and complete to the best of my knowledge. If this application leads to my induction into Leaders Changing the System, I understand that false or misleading information in my application or interview may result in my involvement being terminated. I also understand this does not guarantee I will become a mentor and is based on availability.

Signature:

Today's Date: