

MENTOR APPLICATION



Personal Information

Legal Name: _____
Last First Middle

Date of Birth: ____/____/____ **Gender:** Female Male

Maiden Name: _____ **Nickname:** _____

Home Phone: _____ **Cell Phone:** _____

Email: _____

Driver's License #: _____ **State:** _____

Address: _____
Street City State Zip

How long have you lived at this address? _____ Years _____ Months

Please list any addresses you have lived in the past five years (not including current address).

Street City State Zip

Street City State Zip

Street City State Zip

Street City State Zip

Street City State Zip

Street City State Zip

Marital Status: Single Married Divorced Widowed

Emergency Contact:

Name Relation Phone

References

Please list three personal and/or professional references who have known you for least two years. Please include all information requested.

Name	Relation	Telephone	Number
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Name	Relation	Telephone	Number
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Name	Relation	Telephone	Number
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Background Check

Have you ever had a conviction, suspended sentence, diversion agreement or other judgment against you for any matter listed below? Your answers should include any matter resolved on a plea of guilty or nolo contendere (no contest) and any matter expunged, annulled or sealed.

Any felony or misdemeanor? Yes No

Any municipal ordinance violation? Yes No

Any DUI/DWI? Yes No

Is your driver's license currently suspended? Yes No

Are there any felonies, misdemeanor or municipal charges currently pending against you or are you currently out on bail or on your own recognizance awaiting trial? Yes No

Have there been any allegations, complaints, or reports regarding your involvement in child abuse, or neglect (either confirmed or denied)? Yes No

If yes to any questions above, please explain in writing, below. Acknowledgement does not necessarily prohibit involvement in the program. Your honesty is appreciated.

Applicant Signature: _____

Date: ____ / ____ / ____