



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Reach & Rise® Group Mentor Application

Thank you for your interest in becoming a mentor with the Reach & Rise mentoring program. It is a great way to make a difference in a young person's life. This application is designed to provide information to help us match you with the most appropriate child and your answers will be kept confidential. **For security & safety purposes, all mentor applicants will need to have fingerprints or background checks completed and cleared before being matched with a group.** If you have any questions, please contact the Program Director.

Please mail, fax, or email your completed application to:

Tamyra Bishop
YMCA of Metropolitan Fort Worth
2701 Moresby St, Fort Worth, TX 76105
E: TBishop@ymcafw.org
P: 817-534-1591

Mentor Information:

Date: _____

Name: _____ Age: _____ DOB: _____

Gender: _____ Personal Gender Pronoun (e.g. Him, Her, Their, etc.): _____

Address: _____ City: _____ Zip Code: _____

Home #: _____ Work #: _____

Cell #: _____ Email: _____

Best Way to be Contacted: Home # Cell # Work # Text Email

Best Times to be Contacted: _____

Occupation: _____ How Did You Hear About Us? _____

Please Answer the Following Questions:

Do you have any felony convictions? YES NO

Have you ever abused or molested a child? YES NO

Please check the groups you are available and/or interested in volunteering for:

16 Week Fall Group 16 Week Spring Group 8 Week Summer Group

Do you have any transportation or geographic/location restraints? _____

Why do you want to become Group Mentor? _____

Do you have any experience working with, volunteering, or spending time with youth? If yes, explain: _____

Please describe any **other** volunteer experiences you have: _____

Why do you think youth are referred to mentoring programs? How do you think they would benefit from being in a mentoring group? _____

Do you have any academic pursuits/experience that is related to working with youth? Explain: _____

Do you have any experience being a part of a group or team? Give example: _____

Do you have any experience running or facilitating a group/team? _____

What's your comfort level with leading a group of youth? _____

Who was a mentor for you as a child? What qualities did they have that helped you? _____

Please describe your relationships with your family (e.g. parent(s)/guardian(s), siblings, etc.) both **past & present**. Include how you were disciplined as a youth and by whom. _____

Please describe past and current patterns of drug and alcohol use: _____

What are some of your interests & hobbies? Anything you'd like to share with mentees? _____

Do you have a preference as to the age, race/ethnicity, gender, sexual orientation, special needs, religious beliefs, political affiliation, socioeconomic background, or geographic location of the youth you'd work with? _____

References:

The YMCA checks references for all volunteers and the **Reach & Rise®** Mentoring Program requires 2 Personal References & 2 Professional References. The following information is required of all applicants.

PERSONAL REFERENCES

NAME	PHONE	E-MAIL	RELATIONSHIP TO YOU?	HOW LONG HAVE YOU KNOWN THIS PERSON?

PROFESSIONAL REFERENCES

NAME	PHONE	E-MAIL	RELATIONSHIP TO YOU?	HOW LONG HAVE YOU KNOWN THIS PERSON?

You just finished the first step toward applying to be a mentor & we look forward to getting to know you! Your application will be reviewed by the Program Director and you will be contacted regarding an interview, training group dates, & additional steps needed to complete the application process. YMCA reserves the right to terminate a volunteer applicant or volunteer at any time if needed.

Mentor Applicant Signature

Date

PRIVILEGE AND CONFIDENTIALITY NOTICE: Please note that the information contained on this document is protected and confidential. This document is intended for use by an authorized employee or agent of

