



# { ALEINU } FAMILY RESOURCE CENTER

## ALEINU VOLUNTEER MENTOR APPLICATION

### I. PERSONAL INFORMATION

Name: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Number Street Apartment/Unit*  
\_\_\_\_\_  
*City State Zip Code*

Home Phone: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ FAX Number: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

May we contact you at work? Yes \_\_\_\_\_ No \_\_\_\_\_

Marital Status:  Single  Engaged  Married (year) \_\_\_\_\_  Separated  
 Divorced  Widowed  Children Ages: \_\_\_\_\_

How did you hear about the mentoring program? \_\_\_\_\_

### II. EMPLOYMENT (please attach resume if available)

Are you currently employed? \_\_\_\_\_ Occupation: \_\_\_\_\_

### III. EDUCATION

Level of Education: Yeshivot attended: \_\_\_\_\_  
 College Graduate  Some College  High School Graduate  Other \_\_\_\_\_

### IV. INTERESTS

Please list any groups or organizations you have participated in (including any camps you have worked in):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any hobbies, or special interests, that might assist you in mentoring: \_\_\_\_\_

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Have you ever participated in any mentoring program before?  Yes  No

If yes what program(s) have you participated in? \_\_\_\_\_

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**V. PERSONAL STATEMENT**

Briefly describe yourself and your motivation for wanting to be a mentor: \_\_\_\_\_

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Are you confident that you can make a commitment to spending at least 1 hour a week, for one year, with a child/teen on a regular scheduled basis?  Yes  No

Will you be able to meet the following requirements for training, and supervision?

1. Two 2 hour mentor training sessions
2. Two additional in-service & supervision sessions yearly
3. Monthly phone contact with a supervisor
4. Keeping a brief log of your contacts with the child or teen

Yes  No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**VI. REFERENCES**

Please list the names and addresses of three people who can serve as character references. You must include a Rav as one reference. You may not include relatives or significant others.

1. Name: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Number Street Apartment/Unit*  
\_\_\_\_\_  
*City State Zip Code*

Home Phone: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

2. Name: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Number Street Apartment/Unit*  
\_\_\_\_\_  
*City State Zip Code*

Home Phone: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

3. Name: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Number Street Apartment/Unit*  
\_\_\_\_\_  
*City State Zip Code*

Home Phone: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_