

MEN IN EDUCATION

Mentor Application

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

DOB: _____ EDUCATION: _____

DO YOU CONSENT TO A BACKGROUND CHECK? _____ yes _____ no

FAVORITE SUBJECTS _____

ACTIVITIES/CLUBS/SPORTS: _____

PERSONAL INFORMATION:

“I WOULD DESCRIBE MYSELF AS.....” (CHECK ALL THAT APPLY)

_____ HELP YOUNG PEOPLE

_____ BUILD COMMUNITY RELATIONSHIPS

LIST THE SKILLS/TALENTS/RESOURCES THAT YOU CAN OFFER.

_____	_____
_____	_____
_____	_____
_____	_____

PLEASE TELL US WHAT YOU HOPE TO GAIN FROM THIS MENTORING EXPERIENCE.
