



# Mentorship Program Application

ID#:

**Personal Information:**

<b>Name:</b>	
<b>Home Address:</b>	
<b>City, State, Zip:</b>	
<b>Home Phone:</b>	<b>Cell Phone:</b>
<b>Email:</b>	
<b>Date of Birth:</b>	
<b>Occupation/Title:</b>	
<b>Company:</b>	
<b>Address:</b>	
<b>Work Phone:</b>	

**Education:**

<b>High School:</b>	<b>Major:</b>	<b>Grade</b> ___ [
	<input type="checkbox"/> Graduated	
<b>College:</b>	<b>Major:</b>	[ ] Graduated
<b>Graduate:</b>	<b>Major:</b>	[ ] Graduated
<b>Other:</b>	<b>Major:</b>	[ ] Graduated
<b>Comments:</b>		

**In case of an emergency, who should we contact?**

1)	<b>Day Phone:</b>	<b>Relationship:</b>
----	-------------------	----------------------

**References (3 required):**

1)	<b>Day Phone:</b>	<b>Relationship:</b>
2)	<b>Day Phone:</b>	<b>Relationship:</b>
3)	<b>Day Phone:</b>	<b>Relationship:</b>

Please also complete the **back side of this form**. Thanks.

**For Internal Use Only:**

Received on: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Assigned to: \_\_\_\_\_

Entered on to the Database on: \_\_\_\_\_

Included on to the Volunteer list: \_\_\_\_\_

Comments:

  

Volunteer Duration: From (Start Date): \_\_\_\_\_ to (End Date): \_\_\_\_\_

## Your Commitment & Interests:

1. Date you are interested in starting: \_\_\_\_\_
2. Please check the date(s) you are interested in volunteering with the Mentorship Program:

Mondays at Joseph M. Gallagher	2:30pm - 3:45 pm	
Wednesdays at Buhrer at Kentucky	4:00 – 5:15 pm	

3. Are you volunteering to meet the requirements for an academic program or class for High School or College?

Yes  No

If yes, what is the name of the program or class? \_\_\_\_\_ for what school? \_\_\_\_\_

How many volunteer hours or service hours are you required to perform? \_\_\_\_\_

4. Would you be interested volunteering for occasional evening or weekend activities?  Yes  No

5. Can you work with a small group of students?  Yes  No

6. Can you teach a class on a particular subject or topic: \_\_\_\_\_?  Yes  No

7. If you are interested in volunteering, in what "area"?

Office/Administrative Work

Grant Research/Writing

Supervising/Chaperoning

Special Events

Event Planning

Expertise (Area or Subject): \_\_\_\_\_

Other: \_\_\_\_\_

8. How did you hear about the program? \_\_\_\_\_

9. Previous experiences with youth (scouts, church, community, committees etc.)

---

---

10. Have you ever been a mentor?  Yes  No

If so, please describe your experience.

---

---

---

11. Please circle any of the activities below that interest you. List others in the blank space.

Basketball Football Dance Martial Arts Games Cars Baseball

Camping Hiking Fashion Cooking Golf Music Shopping Art Travel

Other: \_\_\_\_\_

## VOLUNTEER STANDARDS OF BEHAVIOR

This Standards of Behavior is a contractual agreement accepted by volunteers who commit to an Esperanza program. The Standards of Behavior shall guide volunteer's behavior during their involvement in Extension programs. Just as it is a privilege for Esperanza to work with individuals who volunteer their time and energies to the organization, a volunteer's involvement with Esperanza is a privilege and a responsibility, not a right.

Esperanza provides quality educational programs accessible to the Hispanics and the local community.

The primary purpose of this Standard of Behavior is to insure the safety and well being of all Esperanza program participants (i.e., students, their parents and families, professionals, and volunteers). Volunteers are expected to function within the guidelines of Esperanza and the individual program areas. Esperanza's volunteers shall be individuals of personal integrity.

### Esperanza's volunteers will:

- Uphold volunteerism as an effective way to meet the needs of youth and adults.
- Uphold an individual's right to dignity, self-development, and self-direction.
- Accept supervision and support from professional Esperanza staff while involved in the program.
- Accept the responsibility to represent their individual program and the Esperanza's program with dignity and pride by being positive mentors for the youth with whom they work.
- Conduct themselves in a courteous and respectful manner, exhibit good sportsmanship and provide positive role models for all youth.
- Respect, adhere to, and enforce the rules, policies, and guidelines established by Esperanza.
- Not engage in abusive behaviors that physically or verbally threaten or harm any Esperanza program participant, including youth.
- Not commit a felonious act.
- Comply with all civil rights laws and policies, including but not limited to Esperanza's equal opportunity, anti-discrimination laws, and program participant protection policy.
- Perform duties in a responsible and timely manner as outlined in the job description.
- Report immediately any threats to the volunteer's or staff's emotional or physical well being to the Esperanza's professional.
- Accept the responsibility to promote and support Esperanza's programs.
- Handle animals and operate machinery, vehicles, and other equipment in a responsible manner.

## SERVICE RECIPIENT PROTECTION

- Volunteers will not intentionally or purposefully place themselves in a position alone with a member of a vulnerable population, in a one-on-one situation, including, but not limited to, sharing close quarters with Esperanza's program participants.
- Volunteers will endeavor to provide safe and healthy programs for all participants. In cases of illness or injury, participants will be treated on-site by the appropriate health care provider or taken to an appropriate health care provider if necessary, when a legal parent, guardian or caregiver is not available for consultation.
- Volunteers will not, under any circumstances, physically, verbally or emotionally abuse Esperanza's program participants.

I have read and understand the Standards of Behavior and Service recipient protection policy outlined above. I understand and agree that any act or omission on my part that contradicts any portion of these standards is grounds for immediate suspension and/or termination of my volunteer status with Esperanza, Inc.

**Cleveland Metropolitan School District requires a basic background check for mentors working directly with children.**

*By signing you authorize Esperanza, Inc. to conduct a background check.*

**Signature:**

**Social Security Number**

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

(Required if you are under the age 19)

\_\_\_\_\_  
Date

z:\director\staff-mentorship 2008

**“Thank You” on behalf of our students, board of trustees, and staff.**

**Please fax or e-mail completed application to:**

[rafie@esperanzainc.org](mailto:rafie@esperanzainc.org) ★ 3104 West 25<sup>th</sup> Street – 4<sup>th</sup> Floor - Cleveland, OH 44109 ★ Fax: (216) 651-7183