



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Reach & Rise Mentor Application

Thank you for your interest in becoming a mentor with the YMCA's 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 done and cleared before being matched with a youth.** If you have any questions, please contact the Program Director.

Please mail, fax, or email your completed application and a copy of your driver's license and current auto insurance to:

Reach and Rise Mentoring Program
Judy Shearon, Program Manager
TWIN PIKE FAMILY YMCA
P 573-754-4497 C 217-341-3337 F 573-754-6330
twinpikementors@sbcglobal.net

Mentor Information:

Name: _____ Date: _____
Gender: M F Age: _____ DOB: _____
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'd 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
Do you have a clean driving record? YES NO If no, explain: _____
If you have a car, can you provide proof of liability car insurance? YES NO
Why do you want to become a Mentor? _____

Would you be a positive role model to a child? What qualities do you have that will help mentor a child? _____

Why do you think children "act out" or get in trouble? _____

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

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

Do you have any academic pursuits/experience that is related to working with youth? If yes, explain: _____

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 your relationship with a best friend and/or significant other? _____

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

What are some of your interests & hobbies (things you would like to do with your mentee)? _____

Do you have a preference as to the age, gender or ethnicity of the youth you'd work with? _____

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 at any time if needed.

Mentor Applicant Signature

Date