



## Mentor Application & Supplemental Forms

We are excited that you are applying to mentor a student through Take Stock in Children. Please click on the link to the application and supplemental forms. Please fully complete all pieces of the application.

**You will need to be fingerprinted and we will need a copy of your driver's license or government identification** (passport, etc.) in order to work with a student and to enter the schools.\*\* Please go to one of the following locations to complete the fingerprint process.

Alachua County Sheriff's Office  
2621 SE Hawthorne Road  
352-367-4000  
Monday-Friday 9:00-12:00pm; 1:00-5:00pm  
Free for volunteers; bring picture identification.

Gainesville Police Department  
721 NW 6th Street  
352-334-2400  
Wednesdays 9:00-3:00pm  
Cost is \$5 (cash or check); bring picture identification.

\*\* If your current employment required fingerprinting upon hire, please contact us to determine if re-fingerprinting is required.

You may return the completed application, copy of government identification, and fingerprint card by mail or you may bring it to our office in person at 1725 SE 1st Avenue, Gainesville, FL 32641. Upon receipt of the completed application, copy of identification, and fingerprint card, we will contact you to discuss the next step to making a difference in the life of a child.



For office use only:	
<input type="checkbox"/> Initial Interview:	_____ (date)
<input type="checkbox"/> Orientation:	_____ (date)
<input type="checkbox"/> Fingerprints	
<input type="checkbox"/> Background Check:	_____ (date)
<input type="checkbox"/> Initial Match:	_____ (date)
	_____ (scholar)

# Mentor Application

## Identifying Information

Date of Application: \_\_\_\_\_

Name (First, Middle, and Last): \_\_\_\_\_

Gender:  Male  Female Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone : \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Title: \_\_\_\_\_

Employment Start Date: \_\_\_\_\_

## Background Information

Ethnic Group: (check one)

- Caucasian  African American  Hispanic  
 Asian  American Indian  Other (please specify) \_\_\_\_\_

Age Category: (check one)

- 18-30  31-40  41-50  51-60  61+

Are you married? \_\_\_\_\_ Do you have children? \_\_\_\_\_

# sons \_\_\_\_\_ age(s) \_\_\_\_\_ # daughters \_\_\_\_\_ age(s) \_\_\_\_\_

When you were a teenager, to what income group did your family belong?

- low income  middle income  high income

In which schools are you willing to serve? (Please check and then rank)

Middle Schools:

- \_\_\_ Howard Bishop 1901 NE 9<sup>th</sup> St., Gainesville
- \_\_\_ Ft. Clarke 9301 NW 23<sup>rd</sup> Ave., Gainesville
- \_\_\_ Kanapaha 5005 SW 75<sup>th</sup> St., Gainesville
- \_\_\_ Lincoln 1001 SE 12<sup>th</sup> St., Gainesville
- \_\_\_ Mebane 16401 NW 140<sup>th</sup> St., Alachua
- \_\_\_ Oak View 1203 SW 250<sup>th</sup> St., Newberry
- \_\_\_ High Springs Community School 1015 N. Main, High Springs
- \_\_\_ Westwood Middle School 3215 NW 15<sup>th</sup> Ave., Gainesville

High Schools:

- \_\_\_ Buchholz High School 5510 NW 27<sup>th</sup> Ave., Gainesville
- \_\_\_ Eastside High School 1201 SE 43<sup>rd</sup> St. Gainesville
- \_\_\_ Gainesville High School 1900 NW 13<sup>th</sup> St., Gainesville
- \_\_\_ Hawthorne Middle/High School 21403 SE 69<sup>th</sup> Ave., Hawthorne
- \_\_\_ Newberry High School 400 SW 258<sup>th</sup> St., Newberry
- \_\_\_ Santa Fe High School 16331 NW U.S. 441, Alachua

What day/days are you available to serve? (Circle all that apply.)

M      T      W      Th      Fr

What times between 8 a.m. and 2 p.m. is best for you to mentor?

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**\*\*Lunch times work best for our students, if coordinated with your lunch.**

Have you ever volunteered with children before? \_\_\_\_\_

If yes, where and when? \_\_\_\_\_

Special skills, talents, hobbies and interests \_\_\_\_\_

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## Career/Education Information

Highest education completed:

- some school, not a high school graduate
- GED
- high school graduate
- associate's degree in \_\_\_\_\_ from \_\_\_\_\_
- technical/vocational certificate in \_\_\_\_\_ from \_\_\_\_\_
- bachelor's degree in \_\_\_\_\_ from \_\_\_\_\_
- master's degree in \_\_\_\_\_ from \_\_\_\_\_
- doctorate in \_\_\_\_\_ from \_\_\_\_\_
- other \_\_\_\_\_

Are you currently enrolled in any education or training program?  yes  no

If yes, please specify: \_\_\_\_\_

List any clubs or organizations of which you are currently a member: \_\_\_\_\_

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## Mentor Information

How would you describe your communication style?

- friendly and outgoing
- usually wait to be approached by someone new
- reserved until I get to know someone new

I am interested in becoming a mentor because: (check all that apply)

- I think I'd be a positive role model
- I like children
- I have the time to give
- I overcame difficulties growing up and would like to help someone else
- I think I have the personality and abilities to be a good mentor
- I am interested in making a difference in the life of a child
- I believe in the value of mentoring
- I wish I had had a mentor when I was a teenager

Do you have any specific training or experience in dealing with any of the following youth issues: (check all that apply, and if yes, please explain)

- drug awareness \_\_\_\_\_
- teen pregnancy \_\_\_\_\_
- teen violence \_\_\_\_\_
- sex/abstinence \_\_\_\_\_
- other \_\_\_\_\_

Please indicate how comfortable you would be in talking to a Take Stock Scholar about the following:

	very comfortable	comfortable	somewhat	not at all
world of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
goal setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
career planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
college planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
personal experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
hobbies/interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
personal problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
drug awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sex/abstinence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate how comfortable you would be in handling the following potential problems:

(vc = very comfortable; c = comfortable; s = somewhat comfortable; n = not comfortable)

- \_\_\_\_\_ you have a hard time reaching your scholar
- \_\_\_\_\_ you make arrangements to meet, and your scholar doesn't show
- \_\_\_\_\_ your scholar seems unresponsive to your interest in getting to know him/her
- \_\_\_\_\_ your scholar calls you too often
- \_\_\_\_\_ your scholar asks you for money
- \_\_\_\_\_ your scholar has little interest in your job/profession
- \_\_\_\_\_ your scholar shares very sensitive thoughts or information with you

Are there any particular problems you would prefer **not** to handle as a mentor?

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Is there anything else you would like us to know about you? If yes, please explain:

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## Program Expectations

The undersigned acknowledges and agrees that 1) he or she is not obligated, if called upon, to perform the volunteer services herein applied for; 2) Take Stock in Children is not obligated to assign or actively seek to assign her or him a Take Stock in Children scholar; 3) as part of the Take Stock in Children matching process, additional information may be requested from the applicant, and 4) Take Stock in Children reserves the right at all times to terminate any match between any volunteer mentor and scholar for whatever cause.

I declare that all of the statements made in this application are true, complete and correct to the best of my knowledge.

As a mentor in the Take Stock in Children program, I will always act in a behavior that is in the best interest of my scholar. Accordingly, I pledge to each of the following volunteer policy statements. **Please initial your approval next to each statement.**

\_\_\_\_\_ I will notify Take Stock in Children if I must terminate my mentor position for any reason.

\_\_\_\_\_ I will notify my scholar or his or her school liaison or the Take Stock in Children Student Advocate if I am unable to attend a previously scheduled meeting.

\_\_\_\_\_ I will not willfully arrange contact with my scholar off school property and not under the supervision of Take Stock in Children or school officials.

\_\_\_\_\_ I will not drive my scholar in my car.

\_\_\_\_\_ I understand that Take Stock in Children will terminate my relationship with my student if I violate any of the above policies.

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**Applicant's Signature**

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**Date**

## REFERENCES

Please print **COMPLETE** name, address, and relationship of three people. They must have known you for at least two (2) years. Each should be in a position to evaluate your qualifications as a mentor. Please **do not** include family members, current boyfriends, girlfriends, or fiancées as references.

1. Name: \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ E-mail \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ E-mail \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ E-mail \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

### Liability Release/Consent for Release of Information

I do hereby affirm the above information is true. I understand if denied acceptance into a mentoring program, no reason for denial will be given. I hereby consent to Take Stock In Children to release information to other entities, agencies, or individuals. I hereby release Take Stock in Children from any liability whatsoever for any information released or any acts or omissions connected with this application. I understand and consent to Take Stock in Children examining any and all available records or information from any source, to include but not be limited to criminal records.

I hereby allow Take Stock in Children to release any information compiled from my interview, references, or other sources pertaining to my application to become a mentor with Take Stock in Children. I understand that Take Stock in Children will use this information for the purpose of evaluating my ability to meet the initial criteria to serve as a mentor. I hereby release Take Stock in Children from any liability, debt, claim, suit, or obligation of any nature whatsoever should any information be obtained by any other individual, party, or entity.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print your name here.



# Mentor/Student Interest Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_ Student or Mentor? \_\_\_\_\_

*Place a check mark next to any activity you enjoy participating in or watching.*

## Sports

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Boating             | <input type="checkbox"/> Diving         | <input type="checkbox"/> Swimming       |
| <input type="checkbox"/> Skin Diving         | <input type="checkbox"/> Water Skiing   | <input type="checkbox"/> Baseball       |
| <input type="checkbox"/> Basketball          | <input type="checkbox"/> Boxing         | <input type="checkbox"/> Football       |
| <input type="checkbox"/> Softball            | <input type="checkbox"/> Wrestling      | <input type="checkbox"/> Badminton      |
| <input type="checkbox"/> Bowling             | <input type="checkbox"/> Golfing        | <input type="checkbox"/> Miniature Golf |
| <input type="checkbox"/> Go-carts            | <input type="checkbox"/> Handball       | <input type="checkbox"/> Horseshoes     |
| <input type="checkbox"/> Ping Pong           | <input type="checkbox"/> Tennis         | <input type="checkbox"/> Track Meets    |
| <input type="checkbox"/> Tumbling/Gymnastics | <input type="checkbox"/> Bicycle Riding | <input type="checkbox"/> Bow & Arrow    |
| <input type="checkbox"/> Horseback Riding    | <input type="checkbox"/> Kites          | <input type="checkbox"/> Ice Skating    |
| <input type="checkbox"/> Soap Box Derby      | <input type="checkbox"/> Skiing         | <input type="checkbox"/> Crabbing       |

Others (specify): \_\_\_\_\_

## Outdoor Life

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Camping           | <input type="checkbox"/> Hunting        | <input type="checkbox"/> Fishing          |
| <input type="checkbox"/> Animals           | <input type="checkbox"/> Birds          | <input type="checkbox"/> Flowers & Plants |
| <input type="checkbox"/> Gardening         | <input type="checkbox"/> Insects        | <input type="checkbox"/> Snakes           |
| <input type="checkbox"/> Stars (Astronomy) | <input type="checkbox"/> Trees & Leaves | <input type="checkbox"/> Hiking           |

Others (specify): \_\_\_\_\_

## Science & Mechanics

- |                                      |   |   |
|--------------------------------------|---|---|
| <input type="checkbox"/> Auto Repair | <input type="checkbox"/> Aviation                     | <input type="checkbox"/> Chemistry          |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> Engines (gasoline)           | <input type="checkbox"/> Missiles & Rockets |
| <input type="checkbox"/> Computers   | <input type="checkbox"/> Kit Building (specify) _____ |   |

Others (specify): \_\_\_\_\_

# Handicrafts

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Ceramics         | <input type="checkbox"/> Clay Modeling | <input type="checkbox"/> Drawing           |
| <input type="checkbox"/> Indian Bead Work | <input type="checkbox"/> Leathercraft  | <input type="checkbox"/> Model Building    |
| <input type="checkbox"/> Knitting         | <input type="checkbox"/> Crocheting    | <input type="checkbox"/> Painting Pictures |
| <input type="checkbox"/> Sheet Metal Work | <input type="checkbox"/> Tin Can Craft | <input type="checkbox"/> Woodworking       |

Others (specify): \_\_\_\_\_

# Collecting

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Scale Models     | <input type="checkbox"/> Sports Memorabilia | <input type="checkbox"/> Baseball Cards |
| <input type="checkbox"/> Autographs       | <input type="checkbox"/> Coins              | <input type="checkbox"/> Music/Records  |
| <input type="checkbox"/> Dolls            | <input type="checkbox"/> Photographs        | <input type="checkbox"/> Pictures       |
| <input type="checkbox"/> Rocks & Minerals | <input type="checkbox"/> Stamps             | <input type="checkbox"/> Insects        |

Others (specify): \_\_\_\_\_

# Indoor Activities

- |                                      |   |                                      |
|--------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> Card Games  | <input type="checkbox"/> Musical Instrument | <input type="checkbox"/> Chess       |
| <input type="checkbox"/> Cooking     | <input type="checkbox"/> Dancing            | <input type="checkbox"/> Dominoes    |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Reading            | <input type="checkbox"/> Checkers    |
| <input type="checkbox"/> Sewing      | <input type="checkbox"/> Singing            | <input type="checkbox"/> Table Games |

Others (specify) \_\_\_\_\_

From all the above items, the three I like best are:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Do you have any pets? \_\_\_\_\_ What kind? \_\_\_\_\_

Do you play any musical instruments? \_\_\_\_\_ Which one(s)? \_\_\_\_\_

What do you like to read best? \_\_\_\_\_

Which do you prefer? Be in a group \_\_\_\_\_ Be alone \_\_\_\_\_ Play with one friend? \_\_\_\_\_

What clubs or organizations do you belong to, if any? \_\_\_\_\_

What are you afraid of? \_\_\_\_\_

If you had three wishes, what would you wish for? 1. \_\_\_\_\_

2. \_\_\_\_\_ 3. \_\_\_\_\_



## Mentor Job Description

The role of a Take Stock in Children (TSIC) mentor is to guide, encourage, and help students remain focused on their long-term goal of a college education. The volunteer mentor is a resource for his/her student.

### Qualifications:

- 18 years of age or older.
- High School Graduate.
- Believe in the importance of education.
- Have an interest in helping young people.
- Be available to volunteer one hour per week during the school day.

### Responsibilities:

- Complete mentor application forms.
- Successfully pass a national background check.
- Make a minimum one-year commitment to the TSIC scholar.
- Communicate regularly with the local TSIC office.
- Follow all TSIC policies regarding travel with your scholar.
- Inform the TSIC office of any needs the scholar may have regarding academic preparation, such as school supplies.
- Follow the TSIC policy regarding confidentiality.
- Follow the School Board of Alachua County Volunteer Policies.

### Program Limitations:

- The mentor has no responsibility to provide the student with money, food, clothing, or school supplies.
- The mentor has no responsibility to and should not provide transportation for the student.
- The mentor is to visit with his/her scholar on the school campus or at TSIC sponsored events.
- The mentor and student agree to maintain confidentiality unless information received is a potential threat to the student and/or other individuals. Please immediately notify the TSIC school coordinator and the local TSIC office if a concern arises.

I understand the above responsibilities and will abide by the Take Stock in Children and School Board of Alachua County policies relating to volunteering. I understand that TSIC mentoring is a school-based activity.

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Mentor Signature

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Date



## STATEMENT OF CONFIDENTIALITY

I understand that any information pertaining to **Take Stock in Children** scholars and their families is confidential and must not be revealed to any person or agency without specific permission from the scholar and/or his/her family and knowledge of the **Take Stock in Children** program.

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Printed Name

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Signature

Date

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TSIC Staff Signature/ Title

Date

A Program of:

Alachua County  
Public Schools  
Foundation, Inc.



*Invest in Alachua County's Children*

**To be completed by the mentoring organization:**

Volunteer ID: \_\_\_\_\_

Type of official government  
ID examined (append copy): \_\_\_\_\_

**VOLUNTEER APPLICATION FOR PROSPECTIVE MENTORS  
PURSUANT TO THE PROTECT ACT**

Name and address of organization: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Maiden Last

Other names by which known: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt.  
\_\_\_\_\_  
City State Zip Code

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**Please check the appropriate box and, if necessary, fill in the requested information:**

I have a criminal record, and the following are the particulars (offense, date, location/jurisdiction, circumstance and outcome) of such record:

I do not have a criminal record.

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By signing this form, I acknowledge that I have been provided with a copy of this volunteer form and notice. My signature constitutes an acknowledgment that a Federal Bureau of Investigations criminal history background check will be conducted. I have read and understood the foregoing and my certification is true and correct to the best of my knowledge and belief. I swear or affirm that the fingerprints submitted in support of this application are mine. I understand that MENTOR is not liable for the mentoring organization's screening decision, nor for the fitness determination made by NCMEC.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_