



Mentor Application Form

First Name _____

Last Name _____

Address _____

City _____

State _____

Zip/Postal Code _____

Primary Phone _____

Email _____

Date of Birth _____

Do you have a valid drivers license? **Yes** **No**

Do you have a car available for use while volunteering? **Yes** **No**

Why are you interested in volunteering?

Personal Interest Community Service Hours

Educational Internship Court Ordered

Other, please specify.

What is your educational/training background?

Mentor Application Form cont.

What is your employment history?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

How did you hear about Guiding Light?

- Ad Guiding Light Mentoring Staff Family Member
 Website Current Volunteer Friend
 University Current Mentee

Which opportunities do you wish to further explore?

- Group Facilitator Tutoring
 I AM ME Summer Leadership Program Mentoring
 I AM ME Youth Summit
 Other, please specify.

How long can you commit to volunteering?

- One time Occasionally One year
 Other, please specify.

Mentor Application Form cont.

What days are you available?

- Monday Thursday
- Tuesday Friday
- Wednesday Weekends

What times are you available?

- Morning
- Afternoon
- Evening

Do you prefer to work...

- Directly with people served Computers
- Behind The Scenes No Preference

Please check all activities you are interested in.

- Biking Boating Eating Board Games
- Hiking Swimming Gardening Going to the Library
- Golf Animals Cooking Yoga
- Fishing Science Sports Movies
- Camping Music Parks Shopping

Other, please specify.

Mentor Application Form cont.

Languages you speak and level (basic, conversational, fluent)

Do you have any special needs or restrictions we should be aware of?

Reason for Volunteering

Please describe in 3-5 sentences why you want to be a volunteer or intern at Guiding Light Mentoring. Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer or intern?

Date you can begin service _____

Criminal History

All volunteer positions require a Criminal History check. Conviction will not necessarily disqualify you from participating.

Have you ever been convicted of a felony? **Yes** **No**

Explain:

Authorization and Agreement

Guiding Light Mentoring considers applicants for internships/volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please contact the Volunteer Manager.

Signature _____

Drug and Alcohol Testing Consent

Guiding Light Mentoring recognizes the costs to society and to individuals from drug and alcohol use. The organization maintains a firm commitment to strive to provide reliable service to its clients and a safe and healthy work environment for its volunteers/interns. While the vast majority of volunteer/interns are not involved with alcohol abuse or illegal drugs, those who are can have an adverse impact on the workplace, as well as their own job performance. To meet our obligations, and to comply with our obligation under the Drug Free Workplace Act of 1988, the following policy has been adopted and will be enforced: 1. The organization prohibits the unlawful use, sale, possession, manufacture, distribution, or being under the influence of alcohol, drugs or any controlled substance, on organization property, in the presence of organization clients, while on duty, during rest periods and break periods, while operating an organization vehicle or attending an organization-sponsored event. 2. Volunteers/interns who violate this prohibition will be subject to disciplinary action, up to and including termination. Nothing in this policy restricts the organization's right to terminate an volunteer/intern at any time, with or without notice, for any reason not expressly prohibited by law. 3. The organization retains the right to require any volunteer/intern to report for drug and/or alcohol testing for reasonable suspicion or following an accident in which there is injury to persons or damage to property. 4. Volunteers/interns must abide by the terms of this statement and must notify the organization of any criminal drug conviction within five days of the conviction if workplace conduct is involved. 5. New volunteers/interns may be required to report for drug testing after a placement offer has been made but before reporting for the assignment. I have read and understand the Drug Free Workplace Compliance Statement. I agree to comply with the Guiding Light Mentoring's Drug and Alcohol Policy. I understand that any offer of placement with the program may be contingent upon the successful completion of drug testing before beginning assignment, and I consent to testing according to Guiding Light Mentoring's policy.

Signature _____

I agree to allow Guiding Light Mentoring to use any photographic images of myself while participating in this mentoring program. These images may be used in promotions or other related marketing materials. **Yes No**

I, the undersigned, hereby state that if accepted as a mentor, I agree to abide by the rules and regulations of the Guiding Light Mentoring, which I acknowledge have been communicated to me, which I understand, and which may be revised without notice to me from time to time. I also agree to abide by all applicable laws. I acknowledge and agree that the Program requires me to spend a minimum of one hour/week at the assigned location. Further, I agree to attend all required training sessions and the regular meeting updates. I am willing to commit to one year in the program and then may be asked to renew for another year, at my option. During all times in which I am participating in the Program, I understand that I will be required to keep in regular contact with my mentee and communicate with staff frequently. I understand that my participation in the Program is completely voluntary, and such participation is not administered or overseen by Guiding Light Mentoring nor does Guiding Light Mentoring endorse or warrant any results or benefits of the Program. Due to the time commitment involved with my participation in the program, I understand that my direct supervisor at Guiding Light Mentoring must approve my candidacy for participation in the Program before I submit my application to the staff for consideration. I hereby certify that I have not been convicted, within the past 10 years, of any felony or misdemeanor classified as an offense against a person or family, of public indecency, or a violation involving a state or federally controlled substance. I am not under current indictment. Further, I hereby fully release, discharge and hold harmless the Program, participating organizations (including without limitation) Guiding Light Mentoring and all of the foregoing's employees, officers, directors and coordinators from any and all liability, claims, causes of action, costs and expenses arising from, relating to, or which may be, or may at any time hereafter become, attributable to my participation in the Program. I understand that Program staff reserves the right to terminate any mentor from the Program at any time for any reason. The Program takes place solely within the scheduled sessions, exclusively at the Program location, and I agree to limit my actions to the activities permitted within the confines of the program's policies. I understand that any relationships or contact established between mentor/mentee and family members beyond the organized and supervised activities of the Program are neither encouraged nor condoned. I give permission for program staff to conduct a criminal background check and verify any and all information provided by me on this Program application, as part of the screening for entrance into the Program, including without limitation verification of personal and employment references as well as a criminal check with the local authorities. Program staff has final right of acceptance of applicant into the program at their sole discretion. I have read the above Mentor Release Statement and agree to the contents. I certify that all statements in this application are true and accurate.

Signature _____

I certify that the facts set for in this application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the program. I consent to having Guiding Light Mentoring complete a criminal background check prior to volunteering/interning. I agree to complete a drug screening if asked prior to and during my involvement as a volunteer/intern.

Signature _____

Please return completed form to:
4141 Hamilton Avenue Suite #1
Cincinnati, Ohio 45223

If you have questions, please contact:
info@guidinglightmentoring.org
513.541.9777