



MENTEE APPLICATION

Changing Lives for Tomorrow Mentoring Program empowers young people by supporting the creation of youth-generated activities that promote self-worth, responsibility, and intergenerational respect and communication. Mentoring is at the heart of our mission as we strive for youth empowerment and better intergenerational communication by supporting mentees to reach their potential through trusting relationships with adults. Changing Lives for Tomorrow Mentoring Program matches youth age 12-18 with volunteer adult mentors from their community. Mentees commit to meeting with a mentor for 4-8 hours a month for 12 months. Meeting one on one or at group events held periodically.

What is a Mentor?

A mentor is a trusted adult who is there to listen, share guidance, and encourage you through any decisions or situations you ask for help with. Your mentor's primary role is to support you in achieving any goals that you may have and be in your corner. Mentors are: good listeners, people who care, someone who desires to help and support you be whoever you want to be.

Why Should I have a Mentor?

You may already have had a mentor without even realizing it. There are all kinds of informal mentors like teachers, coaches, or aunts/uncles. A mentor is person who may have been through similar life situations and can share experiences and insights. Your mentor is also just a fun person to hang out with, share hobbies with, and try new things.

How long will it take to get matched with a Mentor?

First we will take some time to get to know you better. After reviewing your application, you will meet with the Mentoring Coordinator to introduce yourself and discuss what you're looking for in a mentor. We will work diligently to find someone who shares your same interests and would make a great mentor. Each question on the application is designed to help us get to know you better; the more honest and forthcoming you are the better we can match you. Since each match is different, the time will vary, but you will be keeping informed and updated as we progress.

Name _____ Gender _____

First Middle Last

Nickname / Preferred to be called _____

Address _____

City State ZIP _____

Home phone _____ Mobile phone _____

E-mail address _____

Best way to reach you (email, text, Facebook) _____

Birth Date _____ Age _____ Facebook Name _____

Parent/ Guardian

Name _____

Relationship _____ Phone _____

What day(s) of the week are you available to meet with a mentor? (Circle all that apply):

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

What is the best time(s) for you to meet with a mentor? (Circle all that apply):

Mornings Afternoons Evenings Weekend Days

Please describe your transportation situation.

Write a brief statement on why you are interested in having a mentor.

Do you have any preferences concerning your mentor? (Profession, ethnic group/racial background, same interests etc.)

What qualities do you feel are important for your mentor to possess?

Who has served as a role model for you?

What three words best describe you?

Who do you live with?

Describe your ethnic and racial background.

Do you speak any languages other than English? _____ If yes, please specify: _____

What activities are you involved in? _____

Please list 6-10 activities you enjoy the most (like hiking, arts & crafts, football, basketball, baseball, music, homework, etc): _____

Please list any hobbies or interests you may have that you would like to share with your mentor:

Are you enrolled in any education institution (like high school, GED, college)? _____

Are you working? _____ If so, how often? _____

Where? _____

My favorite thing about school/work is _____

My least favorite thing about school/work is _____

Are there any subjects in school or areas at work you are looking for help with? Please Describe.

Please describe a goal you are working on right now.

Is there anything else you feel would be important for us to know about you?

I certify to the best of my ability that the information provided on this application is true and accurate. I have discussed with my parent/guardian my interest in having a mentor, provided her/him with the enclosed consent and questionnaire, and have included if possible.

Signature Date

Parent/ Guardian Contract

Name: _____ Date: _____

Relationship: _____

Mentee Applicant Name: _____

Best number to reach you at in case of an emergency: _____

Changing Lives for Tomorrow Mentoring Program Release and Indemnity Agreement

By allowing _____ (mentee applicant) to participate in Changing Lives for Tomorrow Mentoring Program I understand he/she will be meeting with a volunteer mentor 18 years or older who has been screened and trained by CLFTMP. I understand that his/her participation in hiking, climbing, field sports, group games and other active events have inherent risk, including but not limited to, the risk of serious physical injury. The undersigned assumes that risk on his/her behalf. Medical treatment for the mentee applicant may be authorized by any Changing Lives for Tomorrow Mentoring Program staff member or volunteer as my agent at my sole expense. I further allow the Changing Lives for Tomorrow Mentoring Program to give any medical provider the name of my medical insurance, which is _____, and my policy number, which is _____ and will provide Changing Lives for Tomorrow's Mentoring Program with the most up to date insurance card. In consideration of the mentee applicant's participation in any and all programs of the Changing Lives For Tomorrow Mentoring Program, the undersigned agrees on his/her behalf to defend indemnity and hold harmless the Changing Lives For Tomorrow Mentoring Program, their agents, servants, volunteers, Board of Directors and staff from any and all claims or damages arising out of (1) the mentee applicant's participation in any and all programs, and (2) any act, omission or negligence of the undersigned. The undersigned releases the Changing Lives for Tomorrow Mentoring Program from any and all claims, damages and causes of action she/he ever had, now has or hereafter may have by reason of the undersigned's participation in the programs of the undersigned's time with the Changing Lives for Tomorrow Mentoring Program. The undersigned agrees and consents on behalf of the mentee applicant to participation in awards, ceremonies, honor rolls and similar public awards for achievement and use by the Changing Lives for Tomorrow Mentoring Program of his/her image in any ceremony, mailing brochures, press releases or advertising. This form, properly executed, must be submitted to the Changing Lives For Tomorrow Mentoring Program on or before the undersigned's arrival at Changing Lives For Tomorrow Mentoring Program and may be revoked at any time having the original of the form returned to the undersigned and a letter of revocation substituted therefore.

Signature of Mentee Applicant _____ Date _____

Printed Name of Mentee Applicant _____

Signature of Parent/ Guardian _____ Date _____

Printed Name of Parent/ Guardian _____

Parent/ Guardian Questionnaire

What do you feel _____ will gain from having a mentor?

Do you have any questions or concerns you would like to discuss with the Mentoring Coordinator?

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