

# Mr. and Ms. Mentoring

#### **Mentee Application**

Please submit your application to <a href="mailto:application@mrandmsmentoring.org">application@mrandmsmentoring.org</a>

#### Mentee

Full Name:
Date of Birth:
Email Address:
Phone Number:
Address:
School:
Hobbies:
General Health Concerns:
Current Behavior Problems:

#### Parent/legal guardian/caregiver

Full Name:
Date of Birth:
Email Address:
Phone Number:
Address (If different then mentee):
Transportation Stability:
Financial Stability:
Emergency Contact:

#### Mentee Goals

Mentoring is a special partnership as well as a commitment between youth and their mentor.

During their time together, the program expects that mentee's will:

- 1. Develop mental health skill/techniques
- 2. Develop social skills while in a large group & individual setting.
- 3. Be informed of educational and community resources.
- 4. Develop positive family interaction skills/ techniques
- 5. Mature personally and build self-confidence.
- 6. Set and achieve short term/long term goals.

### **Difficult Past**

- 1. What do you want out of this program?
- 2. How do you feel about your life?
- 3. What is your biggest stressor, trigger in your life?
- 4. Who is your biggest stressor, trigger in your life?
- 5. How do you feel about your family, and current living situation?
- 6. How do you feel about the community?
- 7. What are your strengths & Weakness's?
- 8. What grade are in you in? & What is your GPA (if applicable)?
- 9. Do you have a job? If so (Explain)
- 10. What makes you Unique?
- 11. What is your perspective on at risk Youth? (Detail)

- 12. Have you worked in a large group before?
- 13. Have you had any traumatic experiences? If so (Explain)
- 14. Do you have any criminal history (felonies or misdemeanors) If so (Explain)?
- 15. Have you had any issues with drugs or substances?
- 16. Miscellaneous (NEED TO KNOW)

## **Parenting Questions**

- 1. What is your biggest concern with the youth?
- 2. Can they interact with others without conflict?
- 3. Do they take any medications?
- 4. Are there any health concerns?
- 5. Is there any Outside services involved (Case Managers, Counselors, Tutors)?
- 6. Will anyone from the family be involved in the youth's family growth activities?
- 7. Will anyone from the family be involved in community events/activities?
- 8. What is your need or help?

If you have someone you would like to invite to be your mentor, please list their name and number to be contacted.

All mentee, mentor contracts are not guaranteed, in extreme cases, mentors can be changed.