

Community Restoration Initiative (CRI) Student Application requesting mentorship

Personal Information: Confidential

Date: _____

Name: _____
last middle first (maiden)

Present Address: _____
street city state zip

Phone: _____ Birthday: _____

Email: _____ Employer (if applicable): _____

Grade: _____ What school do you attend? _____

What is your availability for meeting with your mentor? Please list all potential times for 2-hour mentoring sessions, in detail:

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

Comments: _____

Is your schedule unpredictable due to work/family commitments? Yes / No

If so, could you please give us a general idea of when you are most likely anticipating availability.

Please go into as much detail as possible: _____

Is your schedule unpredictable due to work/family commitments? Yes / No

If so, could you please give us a general idea of when you are most likely anticipating availability. Please go into as much detail as possible: _____

Parent/Guardian Information

Please provide contact info for whichever parent/guardian you would like to use as your emergency contact. If you are under the age of 18 your emergency contact must be a parent/guardian.

Name _____

Phone Number _____

Alternate Phone Number _____

Relationship (example: is this individual your mother, father, grandmother...) _____

Do you have an active relationship with this individual? Yes / No

Do you live in the same household? Yes / No

Alternate Parent/Guardian Contact:

Name _____

Phone Number _____

Alternate Phone Number _____

Relationship (example: is this individual your mother, father, grandmother...) _____

Do you have an active relationship with this individual? Yes / No

Do you live in the same household? Yes / No

Alternate Parent/Guardian Contact:

Name _____

Phone Number _____

Alternate Phone Number _____

Relationship (example: is this individual your mother, father, grandmother...) _____

Do you have an active relationship with this individual? Yes / No

Do you live in the same household? Yes / No

Character Questions: Confidential

Do you have a relationship with Jesus Christ? If so please explain:

If you do not have a relationship with Jesus Christ, what is your religion? Are you open to talking about your religion?

Why do you want a mentor?

What do you picture your relationship with your mentor will look like?

What do you think will be the hardest part of having a mentor relationship?

What do you imagine will be the most rewarding part of having a mentor?

Have you ever had a mentor before now?

Do you currently have a mentor?

What are your top 3 strengths and top 3 weaknesses?

Strengths:

1. _____
2. _____
3. _____

Weaknesses:

1. _____
2. _____
3. _____

What do you like to do for fun?

What is your favorite subject in school?

On a scale of 1-10 how much support would you say you receive from your parents and the adults around you?

1= I am extremely supported/ 10 = I have no support at all

1 2 3 4 5 6 7 8 9 10

What do you want to do after you graduate high school?

On a scale of 1-10 how likely do you think it is that you will be able to achieve your goals?

1= extremely likely/ 10 = not likely at all

1 2 3 4 5 6 7 8 9 10

Have you ever had a bad experience with a mentor?

Be assured that your comments will be held in strict confidence!

The information contained in this application is correct to the best of my knowledge.

The responses I have provided in completing this application form are complete, truthful and accurate. I hereby authorize CRI to make inquiries and obtain permission for my participation in the CRI mentoring program contacting the parents/legal guardians I have listed in my application.

Applicants Signature: _____ Date: _____

Applicants Name (Please Print): _____

Parent/Guardian Signature: _____ Date: _____