



Mountaineer Challenge Academy

MENTOR APPLICATION

Cadet's Name _____ Class _____

Mentor Name _____
First Name Middle Name Maiden Name Last Name Jr/Sr

Have you mentored for the Academy before? Yes No

Date of Birth _____ Social Security # _____ Marital Status _____

Home Address _____ Occupation _____
County _____ Name of Business _____
Business Address _____

E-mail: _____ Name of Supervisor _____
Home Phone: (____) _____ Employed Since _____
Work Phone: (____) _____ Business Phone: _____
Cell Phone: (____) _____
Pager: (____) _____

Best time to contact you. _____

Do you have a valid driver's license? Yes No State _____ License # _____

In what capacity do you know this Cadet? _____

Approximately how far do you live from the Cadet? _____

Please provide a list of your community affiliations (include clubs, organizations, National Guard, church, etc.) _____

What attitudes and beliefs are of special importance to you? _____

Have you ever been a victim of a crime? Yes No
If yes, please explain: _____

Have you ever been convicted of a crime or pled "No Contest"? Yes No
If yes, please explain: _____

Please list interests, hobbies, and activities you enjoy. _____

Religious Affiliation: _____

How many times have you moved in the past five (5) years? _____

Highest education completed: _____

Please list past experiences with youth: _____

All Mentors are required to attend a training session conducted by **the Mountaineer Challenge Academy**.

All persons working with the **Mountaineer Challenge Academy**, paid or volunteer, must consent to a Criminal Background Check. When this application is received, instructions will be sent to you. This is done at no cost to you.

List two references. (One present or past employer and one friend you have known at least 10 years). If you have been in therapy or treatment, please include the name of your therapist as one reference.

(1)	Name _____	Relationship _____
	Address _____	Home Phone _____
		Work Phone _____

(2)	Name _____	Relationship _____
	Address _____	Home Phone _____
		Work Phone _____

Signature of Mentor

Date



Academy Staff Only

Interviewed By _____

Date _____





Mountaineer Challenge Academy

POSITION DESCRIPTION - MENTOR

POSITION SUMMARY

The Mentor serves as a role model, friend and advocate to a corps member for at least fourteen (14) months

WORKING RELATIONSHIPS

Reports to the Case Manager or the Post Residential Coordinator

May Mentor up to two (2) Cadets

DUTIES AND RESPONSIBILITIES

Commits to spending at least fourteen (14) months in consistent contact with a corps member

Returns completed screening materials promptly

Attends Mentor training to learn how to relate effectively to corps members

Assists the Cadet with the Graduate Action Plan development and discusses his or her progress in that Plan

Makes consistent contact with the corps member by phone, mail, or in person. Four contacts per month are required. **At least two of these must be face-to-face during the Post-Residential Phase.**

Observes all Program policies and guidelines for mentors. Discusses violations of policies by Cadet with the Case Manager or Post-Residential Coordinator.

Refers the Cadet to community resources as needed and helps the Cadet obtain those resources.

Shares occasional, informal and fun activities with his or her Cadet. The Mentor and Cadet will jointly select and schedule the activities.

Communicates at least monthly by phone, mail or e-mail with the Case Manager or Post Residential Coordinator. The Mentor promptly informs the MCA of problems or needs in the Cadet's Graduate Action Plan or in their relationship.

Date

Signature of Mentor



Mountaineer Challenge Academy

MENTOR RELEASE OF LIABILITY AND

AUTHORIZATION TO RELEASE INFORMATION

I understand and agree that I will be the adult – the Mentor – spending time with my matched Cadet – the Mentee. I must exercise care in supervising my Mentee while we are together. I am responsible for choosing and conducting activities with my Cadet.

I am not an agent of the **Mountaineer Challenge Academy**. The **Mountaineer Challenge Academy** does not retain any power to control the Mentor-Mentee activities. I understand that all activities must be conducted in the State of West Virginia. I agree that **the Mountaineer Challenge Academy** is not liable for causes of actions relating to the mentoring agreement including, but not limited to, personal injury caused by my negligence.

I release the **Mountaineer Challenge Academy** from any and all liability or claims I might incur while participating in the activities of the mentoring agreement.

I hereby authorize the **Mountaineer Challenge Academy**, along with the law enforcement departments, to conduct whatever background search that may be deemed appropriate.

This information is necessary to assist in determining my qualifications and suitability for the position I am seeking with the **Mountaineer Challenge Academy**.

I fully understand that the information collected may be of a sensitive, confidential, and privileged nature, and may reflect upon my suitability. I hereby release the **Mountaineer Challenge Academy** and its agents from the liability and damage that may result from the exchange of requested information between law enforcement departments and the **Mountaineer Challenge Academy**.

I am willing to serve as a Mentor for the **Mountaineer Challenge Academy**. I understand that my signature will serve as my consent for release of information pertaining to my suitability as a Mentor.

The information provided in this application is true and accurate to the best of my knowledge.

_____ Date

_____ Signature