



P.O. Box 250 Clarkston, GA 30021 • www.cultureconnectinc.org

CULTURE CONNECT, INC.

MENTOR APPLICATION

We are excited that you have expressed an interest in volunteering with Culture Connect, Inc.

INSTRUCTIONS FOR COMPLETING APPLICATION

- 1.** Complete all information as requested.
- 2.** Please submit this application at your earliest convenience.
- 3.** Questions about the application process may be directed to the Volunteer Coordinator at 404-627-4793 ext. 4, or volunteer.coordinator@cultureconnectinc.org.

You may submit your completed application:

By mail:

Culture Connect, Inc.
P.O. Box 250
Clarkston, GA 30321

Email: volunteer.coordinator@cultureconnectinc.org

Fax: (404) 292-8458

MENTOR APPLICATION

Complete all information as requested.

CONTACT INFO:

Full Name:

E-mail Address:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Daytime/Work Phone:

Preferred Method of Communication: Email
Home Phone
Cell Phone
Work Phone

PROFILE:

Date of Birth:

Gender:

Country of Origin:

At what age did you move to the United States?

Language(s) spoken:

(Please include level of proficiency: novice, intermediate, advanced, or superior/native-speaker.)

Religion:

Marital Status:

Why would you like to be a mentor?

What do you hope to gain from being a mentor?

Do you own a car? Yes No

Drivers License Number:

Drivers License Issue Date:

Drivers License State:

Drivers License Expiration Date:

INTERESTS:

Check all that apply:

Arts/Crafts
Computer/Video Games
Movies
Cooking

Dance
Shopping
Reading
Sports
 Baseball
 Basketball
 Football
 Golf
 Hockey
 Soccer
 Softball
 Tennis
 Volleyball
 Other

TV
Music
 Playing
 Listening
Travel
Cultural
 Theater
 Concerts
 Museums
 Other
Outdoors
 Biking
 Canoeing
 Hiking
 Ice-Skating
 Walking

What clubs, organizations, or associations are you involved with?

EDUCATION:

Highest Level of Education:

Degree Date:

School/University/College:

Major:

2nd Major/Minor (if applicable):

EMPLOYMENT INFORMATION:

Organization Name:

Occupational Field:

Position:

Please briefly describe your work.

RELEVANT EXPERIENCE:

Describe any teaching, tutoring, coaching, or mentoring experience you may have.

Describe your most recent volunteer or mentor experience. Please provide the name and the phone number of your supervisor/volunteer coordinator.

Please list any special trainings or skills.

Is there any other information that you would like to provide?

How did you hear about Culture Connect, Inc.'s Programs?

REFERENCES:

Please provide two references from an academic, professional or volunteer experience. One of the references may be the volunteer reference listed above.

Reference 1

Full Name:

Relationship:

Daytime Phone Number:

Reference 2

Full Name:

Relationship:

Daytime Phone Number:

DECLARATION OF CONVICTIONS:

List below any convictions for violations of the law (other than traffic violations) in Georgia or elsewhere.

If you have no convictions, please check here: No Convictions

Date of Conviction:

Offense:

Court and Location:

Disposition and Penalty:

Applicant's Signature:

Date:

AGREEMENT STATEMENT

By volunteering to be a mentor with Culture Connect Inc., you agree to:

- Commit to a minimum of 1 year working with a child or adolescent
- Have 2 to 3 contacts per month (minimum of 4 hours per month) with your mentee
- Submit monthly reports
- Participate in ongoing training and supervision
- Abide by the Mentor Guidelines and Code of Contact (provided at training) at all times

In addition, you agree to:

- Attend the initial training session offered by Culture Connect, Inc.
- Adhere to the mission, volunteer agreement, and anti-harassment policies of Culture Connect Inc. (provided at training)
- Report immediately any problems and concerns you experience with the program
- Send in all monthly reports by the given deadlines

MENTOR RELEASE STATEMENT

I, the undersigned, hereby state that if accepted as a mentor, I agree to abide by the rules and regulation of Culture Connect and its Mentoring Program (the Program), 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. If a mentor, I acknowledge and agree that the Program requires me to spend a minimum of four hours per month with the mentee. Further, as a volunteer or a mentor, I agree to attend all required training sessions and the regular meeting updates. I am willing to commit to one year in the program once I am matched with a mentee and then may be asked to renew for another year, at my option. As a mentor, 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 Culture Connect, Inc. nor does Culture Connect, Inc. endorse or warrant any results or benefits of the Program.

Further, I hereby release, discharge and hold harmless the Program, participating organizations (including without limitation) Culture Connect, Inc. an 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 reserve the right to terminate any mentor frm the Program at any time for any reason. The Program takes place solely within the scheduled sessions, 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 or 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 my screening for entrance into the Program, including without limitation verifaction 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 acurate.

Applicant's Signature

Date