



## Mentor Application and Information Sheet

**Office Use Only**  
Fingerprint Background Check  
Date: \_\_\_\_\_  
Time: \_\_\_\_\_  
Completed: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Street

City

ST

Zip Code

Phone: \_\_\_\_\_

Home

Cell

Work

Email address \_\_\_\_\_

Occupation (current and/or former) \_\_\_\_\_

Current/Former Employer \_\_\_\_\_

Spouse name or other adults in your household \_\_\_\_\_

License Plate Number(s) \_\_\_\_\_

A copy of your current driver's license and insurance card will be kept in your file.

### **Mentor Emergency Contact:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to Mentor \_\_\_\_\_

In case of a medical emergency, I have listed additional pertinent medical information for me on the back of this form. (Mark one.) \_\_\_\_\_ Yes \_\_\_\_\_ No

### **For office use**

My mentee is \_\_\_\_\_

School \_\_\_\_\_

**School Choice/s:** ( please circle all of your choices)

**Brown   Crab Orchard   Homestead   Martin   North   Phoenix   Pine View**  
**Pleasant Hill   South   Stone   CCHS   SMHS   No Preference**

**I would work best with children/youth in the following grades:**

Kindergarten—2nd grade    3rd—5th grade    6th—8th grade  
 High School    I have no grade preference

**Please share with us the experience and skills you have for mentoring children and youth and some hobbies and interests that you might like to share with a child:**

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**How did you hear about Kids On The Rise?**

Facebook    Friend    Newspaper    Other ( \_\_\_\_\_ )

**Personal References:**

1.	_____	_____	_____
	<b>Name</b>	<b>Email Address</b>	<b>Phone</b>
2.	_____	_____	_____
	<b>Name</b>	<b>Email Address</b>	<b>Phone</b>
3.	_____	_____	_____
	<b>Name</b>	<b>Email Address</b>	<b>Phone</b>

Because of our concern for the safety of the children and youth we serve, we ask each prospective mentor to sign the statement below, complete the attached applicant waiver and agree to a fingerprint background check.

**I certify that the information supplied on this application is correct and accurate to the best of my knowledge. In addition, I give permission for Kids On The Rise to contact my references & conduct a criminal background check.**

**Name (print)** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Please email back to [director@kidsontherise.org](mailto:director@kidsontherise.org) or mail to: Kids On The Rise, 328 Taylor St., Ste. 102, Crossville, TN 38555**