



# Mentor Application

**True2U** is a volunteer mentoring program that helps Cleveland **eighth graders** explore their true selves, and prepare to make the most of high school as the first step on the path to college and career readiness.

As part of a **small group advisory team**, you'll spend 8 Thursdays this school year helping students uncover their interests and strengths, set goals, and connect these goals to the educational opportunities offered by the 37 high schools in the CMSD portfolio, setting them on a path of success in college and/or their careers.

Training and enrichment in the topics, facilitation, and cultural competency skills is provided. And you'll have the satisfaction of helping shape—and being shaped by—the next generation of Cleveland's leaders.

## Application Process

Completed applications will be reviewed by staff and a personal interview scheduled. Please note, decisions to accept applicants into the program will be determined by the above as well as participation in orientation and training sessions. **The deadline to apply is August 28, 2017.**

## Contact

The True2U Project Manager is Molly Feghali. You can reach out to her by phone at 216-812-8700 or via email, [molly@neighborhoodleadership.org](mailto:molly@neighborhoodleadership.org). To learn more about the program and its history, visit [neighborhoodleadership.org](http://neighborhoodleadership.org).

## Personal Information

Name \_\_\_\_\_ Phone (Home) \_\_\_\_\_

Home Address \_\_\_\_\_ Phone (Work) \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

County \_\_\_\_\_ E-mail \_\_\_\_\_

Gender      Male      Female      Date of Birth \_\_\_\_\_

Language(s) spoken: \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

Initial here if you **do not** want your contact information shared with your mentor partner: \_\_\_\_\_

How did you hear about True2U? *(If referred by a mentor, please include their name.)* \_\_\_\_\_

## Personal Information *continued*

Do you consider yourself more of a planner or improviser?                      Planner                      Improviser

Do you have a school, geographic, and/or Mentor partner preference? If so, please note that here:

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## Employment Information

Currently Employed: Yes \_\_\_ No \_\_\_ (If yes, provide name and address of company.)

Employer \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Retired:                      Yes                      No

## Education

Level	Institution	Degree/Focus
High School		
College/University		
Graduate School		
Other		

## Community Service, Clubs & Professional Organizations

Please list all clubs or organizations with which you are affiliated in the order of importance to you. (Use an additional sheet if necessary.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

## General Information

1. Why do you want to become a mentor?
2. What experience(s) have you had working with youth?
3. What special qualities, talents, or interests do you possess that could be helpful in True2U?

## Background Information

1. Have you ever been arrested or convicted of a crime? *(If yes, please explain.)*
2. Has a complaint ever been filed against you on behalf of a child with the Department of Children, Youth and Families in any state? *(If the answer is yes, please give brief details of resolution or current status.)*
3. Do you have any physical or mental conditions that may limit your ability to serve as a mentor? If yes, please tell us how our program could assist you in overcoming your condition in order to facilitate your participation in our program:

## Media Release & Background Check Authorization

**Media Release** By signing below I consent to my image or voice being used in photo, video, or other media forms by the True2U program, or its partner organizations, for the use of training, promotional, or other program related purposes. I understand that I am not entitled to any compensation or payment for their use.

**Background Check Authorization** I understand that I have been recruited as a volunteer for the **True2U** program by Neighborhood Leadership Institute who will facilitate my background check through a third party provider.

I hereby release and agree to hold harmless from liability any person or organization that provides information required for the background check. I also agree to hold harmless from liability Neighborhood Leadership Institute, their officers, directors, employees and volunteers and partner organizations. I understand that by submitting this application, I authorize Neighborhood Leadership Institute to make inquiries through the Federal Bureau of Investigations and local law enforcement concerning my suitability as a volunteer mentor for the True2U Program. The information requested in this application and such as may be otherwise obtained, will be used for the purpose of assessing my suitability as a volunteer. **All information will be held in confidence.**

\_\_\_\_\_  
*Applicant Signature*

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

## Mentor Recommendations *(optional)*

Do you have suggestions of others who you feel would make great potential mentors? Please provide their name, e-mail, and contact phone number and True2U program staff will follow up with them.

- 1.
- 2.
- 3.

## To Submit Your Application

Please complete this application and return it to:

**Neighborhood Leadership Institute**  
**5246 Broadway Avenue**  
**Cleveland, Ohio 44127**  
**Attn: True2U**

You may scan and e-mail the completed and signed application to [molly@neighborhoodleadership.org](mailto:molly@neighborhoodleadership.org) or send via fax, Fax: (216) 812-8709

**Office Use Only:** Date Received \_\_\_\_\_ Interview Date \_\_\_\_\_ Status: \_\_\_\_\_

