



## Volunteer Mentor Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Please Circle One: Male / Female

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

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

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Maiden Name (If Applicable) : \_\_\_\_\_

Days/Times of Week Available: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

## Employment History

### Current Employment

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_ Job Title: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

### Most Recent Previous Employment

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_ Job Title: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

## Transportation

Do you have reliable transportation? YES / NO

Car Make: \_\_\_\_\_ Car Model: \_\_\_\_\_ Car Year: \_\_\_\_\_

Car Color: \_\_\_\_\_

License Number: \_\_\_\_\_

## Interests

Please list any hobbies, interests, etc. that we may consider in pairing a foster child with you:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you describe yourself in 5 words?

\_\_\_\_\_

What skills / experience do you feel that you have to offer to a foster child in spending time with them?

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What would you consider to be your greatest strength?

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What would you consider to be your greatest weakness?

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**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

*Please Note that all Volunteers working with foster children and the state of Georgia must consent to a Background Check, Child Protective Services Screening, License Check, and Fingerprinting.*

*Also Please Note that Corporal Punishment is strictly forbidden in all circumstances.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_