



**BUTTERFLY PROJECT MENTORING PROGRAM  
MENTOR APPLICATION**

**Personal Information:**

Name \_\_\_\_\_  
                    First                    Middle                    Last

Address \_\_\_\_\_  
                    Street                    City                    State                    ZIP

Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_

Name/address of employer \_\_\_\_\_

Work phone \_\_\_\_\_ Occupation \_\_\_\_\_

E-mail address \_\_\_\_\_

**Volunteer Information:**

1. Indicate your grade preference:
- Elementary
  - Jr. High/Middle School
  - High School

2. What do you feel are the strengths (bilingual, math skills, previous relevant volunteer experience, etc.) you can bring to this program?

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

3. Write a brief statement on why you have chosen to participate in the mentor program.

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

4. Initial the two statements below:

\_\_\_\_\_ I understand that the mentor program involves spending a minimum of 2 hours every week for 10 months.

\_\_\_\_\_ I understand that I will be required to complete the mentor program orientation and at least two training sessions during the year.

5. Personal Background:

Have you ever been arrested for, convicted or, or plead guilty /no-contest to, a criminal act? YES/NO

Have you ever been accused, arrested, or convicted of any sexually/related crime? YES/NO

Have you ever been accused, arrested or convicted of any abuse-related crime? YES/NO

Have you used illegal drugs in the past 24 months? YES/NO

Have you ever been hospitalized or treated for alcohol or substance abuse? YES/NO

Have you, to your knowledge, been investigated by Child Protective Services, or any other governmental agency involved the protection of minors? YES/NO

If you answered yes to any of the above questions, please explain each on separately (please use additional page if needed):

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6. Educational Background (mark one):

Some high school

Graduate/professional school

High school graduate

Technical school

Some college

College graduate

Other (please specify) \_\_\_\_\_

7. Why do you want to become a mentor? \_\_\_\_\_

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8. Please list four references (please include at least one family member, one personal friend and one work reference):

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/ZIP \_\_\_\_\_

City \_\_\_\_\_ State/ZIP \_\_\_\_\_

Phone number \_\_\_\_\_

Phone number \_\_\_\_\_

Relationship \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/ZIP \_\_\_\_\_

City \_\_\_\_\_ State/ZIP \_\_\_\_\_

Phone number \_\_\_\_\_

Phone number \_\_\_\_\_

Relationship \_\_\_\_\_

Relationship \_\_\_\_\_

In making this application to be a volunteer, I understand that the **Butterfly Project Mentoring Program** routinely performs criminal and driving record checks of all volunteers for the position of mentor for which I am applying. This check may be done on me if I sign below. If I fail to sign, it may be grounds for rejecting me as a mentor.

I certify to the best of my ability that the information provided on this application is true and accurate. I also understand that misinformation knowingly provided here, and on subsequent mentor application forms, is grounds for dismissal.

Background Check:

I give Butterfly Project permission to check my reference, personal and criminal background, using the information I've provided in the application. I understand that I may be disqualified during this process. I understand the Butterfly Project will hold any personal information learned during the background check confidential, I also affirm, to the best of my knowledge, that the information herein is correct. **(Please also submit a background check, \$10 at the local police department.)**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**Optional Information:**

1. Social Security number (needed for criminal record checks): \_\_\_\_\_

2. Birth date (needed for record checks): \_\_\_\_\_

3. Do you prefer working with a particular grade level (approximate ages are in parentheses)?

- |   |   |
|---|---|
| <input type="checkbox"/> Grade 2-3 (ages 7-8) | <input type="checkbox"/> Grade 6-8 (age 11-13)    |
| <input type="checkbox"/> Grade 4 (age 9)      | <input type="checkbox"/> Grade 9-10 (ages 14-15)  |
| <input type="checkbox"/> Grade 5 (age 10)     | <input type="checkbox"/> Grade 11-12 (ages 16-18) |

4. Do you prefer working with a quiet, reserved child?  Yes  No  No Preference

5. Do you prefer working with an outgoing child?  Yes  No  No Preference

6. Do you prefer working with a student from a specific racial/ethnic group?  Yes  No  
 No Preference If yes, please specify: \_\_\_\_\_

7. Do you speak a foreign language? \_\_\_\_\_ If yes, please specify: \_\_\_\_\_

8. Please list any hobbies or interests you may have: \_\_\_\_\_  
\_\_\_\_\_

9. What would you like to do with a mentee? \_\_\_\_\_

10. What clubs or groups, if any, do you belong to? \_\_\_\_\_  
\_\_\_\_\_

11. My favorite subject in school was \_\_\_\_\_

12. My least favorite subject in school was \_\_\_\_\_

13. Please put an X by the activities you enjoy the most:

- \_\_\_ Playing sports such as \_\_\_\_\_
- \_\_\_ Watching sports such as \_\_\_\_\_
- \_\_\_ Writing \_\_\_\_\_
- \_\_\_ Reading \_\_\_\_\_
- \_\_\_ Listening to music such as \_\_\_\_\_
- \_\_\_ Photography \_\_\_\_\_
- \_\_\_ Attending plays \_\_\_\_\_
- \_\_\_ Going to the movies \_\_\_\_\_
- \_\_\_ Arts and crafts \_\_\_\_\_
- \_\_\_ Visiting zoos and parks \_\_\_\_\_
- \_\_\_ Visiting museums \_\_\_\_\_
- \_\_\_ Using computers \_\_\_\_\_
- \_\_\_ Playing games \_\_\_\_\_
- \_\_\_ Cooking \_\_\_\_\_
- \_\_\_ Exploring possible careers \_\_\_\_\_
- \_\_\_ Hiking and seeing nature \_\_\_\_\_
- \_\_\_ Other \_\_\_\_\_

14. What qualities would you like in a mentee? \_\_\_\_\_

15. What individual has served as a role model for you? Why? \_\_\_\_\_

16. If you could recommend one book for your mentee to read, what would it be?  
\_\_\_\_\_