

**Jewish Family Service
Mentor Connection
Career Mentor Job Description**

TITLE: Career Mentor

SUPERVISORS: Katie Holden
Director
248.592.1193

TIME COMMITMENT: A three month commitment, including:

- 10 hours spent at place of work during three month period
- Commit to visiting socially with mentee once per month.
- Communicate with mentee, via phone or e-mail, once per month.

DUTIES: Offer a child valuable companionship and support by providing the young person with one-on-one attention and guidance on a weekly, or bi-weekly basis. Activities will be in a social environment, either in a home, a restaurant, or other facilities. Attend additional mentor/mentee activities throughout the year and at least two in service trainings.

QUALIFICATIONS: Over age 25
Commitment of at least three months
Enjoy spending quality time with a young adult
Pass criminal check
Attend trainings
Complete pre and post survey
Communicate once a month with Match Specialist
One-on-one interview with program staff.



Career Mentor Application

Personal Information

Name: _____ Date: _____

Street Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Date of Birth: ___/___/___ Gender M F

For grant purposes please indicate if you are Jewish (optional): Yes No

Ethnicity (optional): European American Asian American
 Latino Arabic
 African American Multi-racial
 Native American Other: _____

Emergency Contact

Name: _____ Phone (H or C): _____

Phone (W): _____ Relationship to Applicant: _____

Education

Check all degrees obtained listing both the name of the school and major studied:

High School Diploma
School: _____

GED

Bachelors Degree
School: _____
Major: _____

Masters Degree
School: _____
Major: _____

Doctorate Degree
School: _____
Major: _____

Other
School: _____
Major: _____

Are you currently enrolled in school?

Yes No

If yes:

Full-time student

Part-time student

Name of school: _____

Major: _____

Employment History

Please provide employment information for the past five years, with most recent position held first. If more space is needed use an extra sheet of paper.

Currently Employed:

Full-Time

Part-Time

Employer: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Supervisor's Name: _____ Title: _____

Phone: _____

Dates of Employment: _____ to _____ (m/year)

Position Held: _____

Employer: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Supervisor's Name: _____ Title: _____

Phone: _____

Dates of Employment: _____ to _____ (m/year)

Position Held: _____

Employer: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Supervisor's Name: _____ Title: _____

Phone: _____

Dates of Employment: _____ to _____ (m/year)

Position Held: _____

Mentor Referrals

Please indicate three individuals (preferably men) who you feel would make a good community and/or career mentor and would be interested in hearing more about Mentor Connection.

Name: _____ Home phone: _____ Cell: _____

Address: _____
(street) (city) (zip)

E-mail: _____

Name: _____ Home phone: _____ Cell: _____

Address: _____
(street) (city) (zip)

E-mail: _____

Name: _____ Home phone: _____ Cell: _____

Address: _____
(street) (city) (zip)

E-mail: _____

Memberships/Associations

Please indicate any type of membership or association you hold (including, but not limited to, place of worship, fraternity/sorority, professional group, recreational group, etc.):

1. _____
2. _____
3. _____
4. _____
5. _____

Application Questions

Please answer all of the following questions as completely as possible. If more space is needed, use an extra sheet of paper or write on the back of this page.

1. How did you learn about Mentor Connection?
.
2. What qualities, skills, or other attributes do you feel you have that would benefit a youth or young adult?
Please explain.

3. Can you commit to participate in the Mentor Connection program for a minimum of three months from the time you are matched with a mentee?

4. Are you willing to communicate regularly and openly with program staff, provide monthly information regarding your mentoring activities, and receive feedback regarding any difficulties during your participation in the mentoring program?

Please read carefully before signing

Mentor Connection appreciates your interest in becoming a mentor.

Please initial each of the following:

- I agree to follow all mentoring program guidelines and understand that any violation may result in suspension and/or termination of the mentoring relationship.
- I understand that Mentor Connection is not obligated to provide a reason for their decision in accepting or rejecting me as a mentor.
- (optional) I agree to allow Mentor Connection to use any photographic image of me taken while participating in the mentoring program. These images may be used in promotions or other related marketing materials.

I understand I must return all of the following *completed* items along with this application. I understand that any incomplete information will result in the delay of my application being processed:

- Signed Information Release Form
- Personal References Form

By signing below, I attest to the truthfulness and completeness of all information listed on this application and agree to all of the above terms and conditions.

Signature

Date

**Jewish Family Service
Mentor Connection
Mentor Personal References**

Please list the names, addresses, and phone numbers of three people you would like to use as character references. Please include only individuals you have known for at least one year and no more than one relative. Any information Mentor Connection gathers from these references will be held as confidential and not released to you, the applicant.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____

Relationship: _____ How long known: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____

Relationship: _____ How long known: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____

Relationship: _____ How long known: _____