



# TWEEN MENTEE APPLICATION

## Parent/Guardian Information

### Overview

In beTWEEN Girls carefully screens and selects Teen Mentors based on their ability to be a strong, positive role model. They are then paired with the most compatible TWEEN Mentee to offer guidance and encouragement. One-on-one activities, that will help develop personal, trust worthy relationships will offer support with topics such as peer pressure, friendships/relationships problems, body image, school issues, and decision making skills. Through these relationships, as well as recreational and group activities, our matches share friendship, support, and fun. Mentors and Mentees get together twice a month. Both Mentors and Mentees make a commitment to spend time together throughout the academic year. They can participate in activities that they both enjoy. We plan social group activities on a monthly basis that are open to all participants. We are also available at all times to answer questions, offer support and help matches work through challenges that may arise.

### Recruitment of Mentors and Mentees

Mentors complete a written application, including three references. They then participate in a one-on-one interview with the Board of Directors, at which time they learn about the program in detail, and we get to know them and their background. After completing the interview process, the Mentor must attend multiple training sessions. Mentees also complete a written application, which includes a parent/guardian consent form. We ask that parents attend an orientation held during the beginning of September to receive more information about the program and our guidelines.

### Matching

The Board of Directors matches Mentors and Mentees based on shared interests and personality. Unfortunately, we may not be able to match everyone who applies at this time. We simply do not have equal numbers of Mentors and Mentees. If a TWEEN Mentee is not matched, please understand that it is not because she isn't "qualified" for the program. Instead they have the opportunity to participate in our Group Mentoring program and stay involved in all activities, workshops and programs that we offer. If a TWEEN Mentee applicant is matched, their Mentor will contact them by phone to let them know, and will host a special activity where they will be introduced to their Mentor.

### After The Girls Are Matched

After the TWEEN Mentees are matched, they will meet with their Mentor at least twice a month for 1-2 hours. The exact time and place will be given to you at a later date. Parent consent must be given for all activities for both Mentors and Mentees to participate in. As the Mentors are volunteers, it is important that the Mentee and the Mentor are both respectful of the other's time.

### Group Activities

We host social activities about once a month. These activities give us a chance to get together and have fun! Along with program-wide activities, our Board of Directors and Teen Mentors coordinate other events throughout the year for pairs and our large groups. We strongly believe in giving back and host many outreach and volunteer activities. The girls all have an opportunity to work on rewarding service projects, and take part in and/or help plan fundraising efforts to support our Mentor Scholarships. This is to encourage a sense of community within in our program and creates a chance for our participants to get to know each other better.



# Mentorship Program

## Mentee Application

Please write clearly and answer every question.

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

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

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Grade: \_\_\_\_\_ School: \_\_\_\_\_

Name of Parent(s)/Guardian(s): \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Parent's Cell Phone Number(s): \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

What kind of person would you like your Mentor to be? (A good listener, active in sports, etc.)

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What are three words that would best describe you? \_\_\_\_\_

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Please list a few of your strengths: \_\_\_\_\_

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What are some things that you believe a Mentor could help you improve upon?

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What clubs, activities, or sports are you in now? How much of your time do these activities take up?

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What kind of activities would you like to do with the Youth Mentor Program?

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Is there anything else that you would like to describe about yourself that may help us find the best Mentor for you?

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We will do our best to match you with a Mentor who has similar interests and who we think will be a good role model for the upcoming year. You will meet with your Mentor for 1-2 hours a week and it is important to try to attend the group activities each month.

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

#### Time Schedule

Please provide an idea of your availability. Most likely we will be meeting after school from 4:15-5:30 or in the evening from 7-8:15. There is also a possibility of Saturday meetings.

MONDAY \_\_\_\_\_ TUESDAY \_\_\_\_\_ WEDNSDAY \_\_\_\_\_ THURSDAY \_\_\_\_\_

FRIDAY \_\_\_\_\_ SATURDAY \_\_\_\_\_ SUNDAY \_\_\_\_\_



# Mentee Program

## PARENT/GUARDIAN CONSENT AND LIABILITY RELEASE FORM

I, \_\_\_\_\_, give my consent for In beTWEEN Girls to match my child, \_\_\_\_\_, with a compatible Teen Mentor. I will also give consent for my child to participate in all In beTWEEN Girl activities. In consideration of the advantages of participation in the Mentorship Program, the undersigned agrees that In beTWEEN Girls, its agents, and its employees shall be released and exempt from any liability for damages for bodily injuries or property damages that may occur as a result of participation in the Mentorship Program, except to the extent of insurance liability as provided by law.

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

\_\_\_\_\_  
Print Name Relationship to child

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

\_\_\_\_\_  
Home Phone Number Mobile Phone Number Work Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Emergency Contact and Phone(s)

Will you be able to help with transportation of your child to meet with the Mentor? Yes or No

Please write here why you think your child would benefit from the program and list anything of interest, i.e. special needs or concerns: \_\_\_\_\_

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

**\*\*\*\*\*PLEASE RETURN WITH MENTEE APPLICATION\*\*\*\*\***