

Great Expectations at WHS Mentor Application

Name

First

Middle Initial

Last

Home Address

Email Address

Phone Number (cell preferred)

1. Why are you interested in becoming a mentor in the Great Expectations Mentoring at WHS program?

2. What do you believe are the strengths you bring to a mentoring program?

3. Have you had any experiences in a mentoring program either as a mentee, mentor or both? What was your experience and how did it frame your desire to be a mentor?

4. What individual has served as a role model for you? Why?

5. What type of formal or informal experiences do you have working with high school students?

6. This mentoring program is relationship-focused. What do you consider to be effective practices when building relationships with high school students?

7. Please provide two references, one professional and one personal.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Relationship: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Relationship: _____

8. Please go to our [volunteer page](#), read the Volunteer Guidelines Document and indicate you have read the document with your initials below.

Volunteer Guidelines Document _____

9. I understand this program is meeting twice a month during the school day according to the attached schedule. I am able to attend the mentoring meetings during these time periods.

Yes _____

No _____

10. Statement and Authorization

I hereby certify that the statements herein and all other information submitted, as part of my volunteer application is true, complete, and correct to the best of my knowledge and belief. I am willing to complete and authorize a background investigation authorization form for volunteers (www.wayzataschools.org/background-check – this is for your reference only; you will be contacted if your volunteer job requires this to be completed).

I understand that any false statements or significant omission shall, at the discretion of Wayzata Public Schools, be grounds to disqualify me from a volunteer position. (Please enter your initials.). _____

Thank you for submitting your application to be a mentor. We appreciate your spirit of volunteerism and community! You will receive notification of your status by September 25.

If you have any questions or concerns you can contact Jodi Olson:

Jodi Olson

Community Engagement and Partnerships Coordinator

Jodi.olson@wayzataschools.org

763 745-5209