



Mentor / Volunteer Application

PERSONAL

Last Name		First		M.I.	DOB	
Street Address			Apartment/Unit #			
City	State		ZIP			
Home Phone	Mobile Phone					
Email Address						
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		
Social Security Number: _____ - _____ - _____						
I agree to give the Wood Family Foundation permission to complete a background check on me. YES <input type="checkbox"/> NO <input type="checkbox"/>						

EDUCATION

High School				Address			
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College				Address			
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other				Address			
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	

REFERENCES

Please list three professional or personal references.

Full Name		Relationship	
Company		Phone	
Address			

Full Name		Relationship	
Company		Phone	
Address			

Full Name		Relationship	
Company		Phone	
Address			

EMPLOYMENT

Are you currently employed? YES NO

Company	Phone
Address	Supervisor

Job Title

Responsibilities

From	To	
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If you are NOT employed are you currently looking? YES NO

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

ADDITIONAL INFORMATION		Details	
Do you speak any additional languages fluently besides English?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Do you own or have access to a car?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you been a mentor before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you volunteered with WFF before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Do you have obligations that may affect your commitment to Pitch In?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Do you know of anyone who would be interested in being a Pitch In mentor/volunteer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Please indicate if you are willing to approach your employer about any of the following:	<input type="checkbox"/> Mentoring/Volunteer Opportunities	<input type="checkbox"/> Corporate Sponsorship	
	<input type="checkbox"/> Matching Employee Gift / Giving	<input type="checkbox"/> In Kind Donations or Other Services	
What is your shirt size?	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/> XL <input type="checkbox"/> OTHER <input type="checkbox"/> _____
What days are you available?	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/>
What times are you available?	Morning: <input type="checkbox"/> 8:00 – 11:00am	Afternoon: <input type="checkbox"/> 11:00am – 2:00pm	Late Afternoon: <input type="checkbox"/> Evening: <input type="checkbox"/> 2:00 – 5:00pm 5:00 – 8:00pm

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
I understand that false or misleading information in my application may result in not being eligible to participate in the pitch in mentoring program.	
Signature	Date

Why do you want to become a mentor/volunteer?
What do you hope to gain as a mentor/volunteer?

What are your expectations from this experience?

What expectations do you have for your participant and parent/guardian?

How would you describe your personality? (Outgoing, serious, laid back, fun, etc.)

What are some activities that you enjoy doing?

What are your areas of expertise? (Arts, Health, Science, Education, etc.)

How do you think your area of expertise will be helpful to participants?

Any additional information you think would be helpful for us to know about you?