



IN PERSON, ONSITE Tutor/Mentor Application (CUSTOMIZE BY ADDING YOUR CHURCH or ORGANIZATION NAME, ADDRESS, YOUR CHURCH PHONE, also include YOUR MINISTRY NAME) and *Rebecca's Garden of Hope, Inc.*

Date: _____

Important information about you:

Name (Please write or type name below)

First _____ Middle _____ Last _____
Gender Male Female

Full Address _____
_____ City _____ State _____ Zip Code _____

Home phone _____ Cell phone _____

Name of employer _____

Work phone _____ Occupation _____

E-mail address _____

General Questions:

Briefly describe why you wish to become a tutor/mentor

Do you have previous experience volunteering or working with children? Please specify

What qualities or skills do you feel you have that would benefit the children in our program?



Tutor Application

What days of the week are you available to mentor? (Check all that apply):

Monday __ Tuesday__ Wednesday __ Thursday__ Friday__ Saturday__ Sunday __

What is the best time for you to mentor? (Check all that apply):

Mornings____ Afternoons____ Evenings ____ Weekends ____

Educational Background (mark one):

Some high school ____ Graduate/professional school ____

High school graduate _____ Technical school ____

Some college _____ College graduate ____

Other (please specify) _____

List any additional languages that you speak. Please specify level of fluency.

Please check your interest and activities:

Sports

Photography

Outdoor Activities

Music

Arts and Crafts

Amusement Parks

Reading

Dance

Computers/Electronics/Video Games

Other (please specify) _____

Background Screening

Have you been convicted of any felony or misdemeanor?

Yes No

Do you currently have criminal charges pending against you?

Yes No



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If the answer is YES to either or both questions, please explain (below):

Driver Information

Do you have access to reliable transportation? Yes No

Have you had any accidents during the past three years? Yes No

Have you had any moving violations during the past three years? Yes No

Drivers License Number _____

State of Issue _____ Expiration Date _____

SS# _____ **(This information must be included to conduct a national criminal and sex offender background check and will be held in the strictest confidence)**

Birth day: Month _____ Day _____ Year _____

References

Please list three (3) references who you have known for at least one (1) year. Please provide complete addresses and phone numbers. References will be contacted by phone or by mail. The information furnished to us by your references will remain strictly confidential. Relatives or family members cannot be used as references.

Reference #1

Name _____ Phone _____

Address _____

City _____ State _____ ZIP _____ Email _____

Reference #2

Name _____ Phone _____

Address _____

City _____ State _____ ZIP _____ Email _____

Reference #3

Name _____ Phone _____

Address _____

City _____ State _____ ZIP _____ Email _____



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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 tutor/mentor application forms, is grounds for dismissal from the program and any necessary legal actions might stem from such misinformation. I also agree to **submit to a background** check on behalf of this tutoring program to ensure I am legally able to work with children.

Finally, by signing this form I agree to support the efforts of the mentoring program at (ADD YOUR CHURCH OR ORGANIZATION'S NAME, ADDRESS, YOUR CHURCH PHONE, also include YOUR MINISTRY NAME) and *Rebecca's Garden of Hope, Inc.* I agree to program rules as stated by the program overview. (Customize to include dates and times and other important information for program). If I am unable to attend on any given day, I agree to contact the Director of the Program at least 1-2 days, when possible prior to missing the session.

Signature of applicant _____ Date _____

Print Name _____

Signature of witness _____ Date _____

Print Name _____

* Check your local laws to determine if additional information should also be included on any of the forms.