



Dear Prospective Mentor:

Thank you for your interest in becoming a mentor in the Take Stock in Children Program.

Enclosed is information on the program and application forms for the mentoring position. You may fax, scan or mail the documents to our office at your earliest convenience.

Once the forms have been received and processed, we will be touch to schedule a one-hour program orientation.

We look forward to working with you, please contact our office with any questions you may have.

Sincerely,

Ashlie Gray

Mentor Coordinator
Take Stock in Children

Office: 671-4162

Fax: 671-4168

Email: Ashlie.Gray@marion.k12.fl.us

Mailing Address:

Public Education Foundation
1239 NW 4th St.
Ocala, FL 34475



Take Stock in Children Mentor Information

Why Mentor?

With the current high school dropout rate, and economic challenges our students and their families face, mentoring is a powerful avenue to provide positive personal contacts for our “at-risk” youth. Your influences can help build a foundation of basic values and challenge students to take responsibility for their actions. They can start to set goals and understand the importance of staying in school. As students begin to realize that someone cares, school absenteeism decreases and academic performance improves.

By building self-worth and demonstrating that someone cares, students will have a better chance of staying in school and playing a productive role in the community. As a successful person, you will be able to share your experiences with a student and open a new world of possibilities to them.

Who Can Be A Mentor?

Any responsible adult who is willing to share time on a consistent basis can be a mentor. The mentor will show the student that someone cares about them and wants them to stay in school. You will become a friend, and a role model to a student who may not otherwise have an adult to guide and direct their actions and choices which are critical to their future success.

What Does a Mentor Do?

A mentor commits to working with a student at school for a minimum of a half hour a week through-out the student’s school career. A mentor should create a schedule for the meeting with the child such as, 5 minutes on homework, 10 minutes discussing goals, and the last 15 minutes developing the relationship with the child. Take Stock in Children is not a tutorial program. We encourage helping the student with some homework but sometimes the student just needs someone who will listen and provide encouragement.

Where Do I Mentor?

All mentoring is done on the school campus, usually in the library, guidance department, cafeteria or other area on campus in the presence of school staff.

When Can I Mentor?

Mentoring sessions take place during the school year; during school hours. A schedule is arranged between you and the teacher as to when should be the best time for you and your student to meet.

How Does A Mentor Know What To Do?

After an initial orientation and training session, you will schedule your first meeting with your student. A mentor handbook provides helpful information and tips to guide you in the mentoring process. A coordinator at each school is designated for on site assistance.

How Does A Mentor Benefit?

There is an opportunity for personal growth, developing new skills, making new friends of all ages. Satisfaction of helping children learn, recognition for contributing to the community and a higher productivity and creativity at work are additional benefits.

What is Team Mentoring?

Although Take Stock in Children would prefer one mentor with one student, we recognize the hectic schedule successful people have and are willing to allow mentors to team up with someone. Team mentoring assures the student that someone will be there.

How Can I Become a Mentor?

When you have decided to make that commitment to work with a Take Stock student, you can complete a Take Stock in Children mentor application. You will be interviewed by the Take Stock staff and sign a commitment form with Take Stock. You will then be matched with a student who needs and will benefit from your influence.



Job Description of a Mentor

Purpose: The purpose of a mentor in the Take Stock in Children program is to guide, encourage, and help students remain focused on their long-term goal of a college education. The mentor is a volunteer and will be a friend, a listener and a link to community resources.

Qualifications:

- Adult, 19 years of age or older
- High school graduate
- Belief in the importance of education
- Interest in helping children
- Available to volunteer 30 minutes per week during school hours

Duties:

- Complete the application, including background screening release.
- Be interviewed and attend mentor orientation.
- Meet an average of once per week with the student at the school the student attends.
- Attend additional training and TSIC activities.
- Communicate regularly with TSIC coordinators regarding problems or successes.
- Make a minimum one year commitment to the student.
- Comply with the School Board policies for volunteers including signing in at the school.

Limitations:

- The volunteer has NO responsibility to provide the student with money, food, clothing or school supplies, etc.
- The volunteer has NO responsibility to and SHOULD NOT, under any circumstances, provide transportation for the students or their families.
- TSIC mentoring is to be done at the school ONLY.
- Please limit any gifts (none are expected or required) to token items for birthdays or holidays.
- Mentor and student agree to maintain confidentiality unless information received is a potential threat to the student and/or other individuals. Please notify the TSIC coordinators if a concern arises.

Please sign below.

I will abide by the Marion County School Board policies on confidentiality and other applicable policies. I will abide by the above limitations. I understand that the TSIC mentoring is to be done only at the school the child attends. Any other contact with the student is not a part of the TSIC program.

Mentor Signature

Date



Authorization and Release Form to Conduct a Background Check

I, the undersigned applicant, do hereby authorize Take Stock in Children and the Public Education Foundation of Marion County by and through its independent contractor, 3-D Background Screening, hereafter known as “3D”, to conduct background information checks on me as a portion of the screening process related to my application to be a mentor for Take Stock in Children.

These above mentioned background information checks may include, but are not limited to, employment and education verifications,, social security verification, driving record information, personal references, and personal interviews. I further understand that an acceptable background check will allow me to continue the application process and that an unacceptable background check may result in the discontinuation of my application process. I understand, if I am accepted into the Take Stock in Children mentor program prior to the completion of the background check; that an unacceptable background check will result in my termination.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any criminal background search prepared on me upon written request to the Public Education Foundation within a reasonable time after the date of such search.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Take Stock in Children, by and through 3D, including, but not limited to, any courthouse, any public agency, and all law enforcement agencies, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I hereby release Take Stock in Children, the Public Education Foundation, 3D, and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, of whatever kind, by me, my heirs or others making such claim or demand on my behalf, for procuring, selling, providing, brokering and/or assisting with compilation or preparation of the background information check hereby authorized.

PRINTED NAME: _____
First
Middle
Last

SIGNATURE: _____ Date: _____



Name and Likeness Usage Consent and Release

FOR MENTORS:

I, the undersigned, certify, represent and warrant that I am a Take Stock in Children Mentor _____. For good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned (“I” or “me”), as the Mentor hereby irrevocably authorizes Take Stock in Children, Inc., TSIC, Inc. d/b/a Take Stock in Children (“TSIC”) and each of their respective representatives, licensees, successors and assigns and those acting with authorization from the Public Education Foundation of Marion County (the “Lead Agency”) or TSIC (collectively, the “TSIC Program Providers”) to film, videotape, photograph and/or record my image and I irrevocably grant the right and authorize each of them to store, reproduce, edit and create derivative works based upon such film, videotape, photography and/or recording (collectively, the “Works”), as well as display, publicly, distribute, transmit or otherwise use the Works and my voice, name and likeness, in whole or in part, either alone or in conjunction with other material in or in connection with the Take Stock in Children Program’s events, products and services, as well as in advertising and promotion thereof in any form or format which may be reproduced, distributed, transmitted, exhibited and/or otherwise exploited, in whole or in part, alone or in conjunction with other material for the TSIC Program Providers’ own account in perpetuity throughout the world in any and all manner or media now known or hereafter devised including, without limitation, all forms of television, radio, print and the Internet.

I acknowledge and agree that as between myself and the TSIC Program Providers, the TSIC Program Providers shall exclusively own any and all rights in the Works and all elements thereof including, without limitation, all rights of attribution, moral rights and copyrights throughout the world in perpetuity. For avoidance of doubt, I hereby irrevocably assign to the TSIC Program Providers any and all rights I may have in and to the Works as well as any results and proceeds of such Works or my appearance in the Works. I agree not to use, reproduce, distribute or otherwise exploit the Works myself or authorize others to do so without the TSIC Program Providers’ prior written consent.

I hereby irrevocably release the TSIC Program Providers from, and agree not to assert, any and all claims I have or may have in the future, known or unknown arising for such use including, without limitation, claims of invasion of privacy, violation of right of publicity, defamation, false light, moral rights, royalties or other compensation or any other claims and waive any and all equitable or injunctive. The TSIC Program Providers shall not be obligated to make any payment to me for the use of my name, likeness, appearance, voice or other attributes in the Works or their exploitation, to produce or exploit the Works or to include my appearance therein even if produced and neither I shall have any right to review or approve any of Works or their use. I certify and acknowledge that my appearance is not governed under the provisions of any collective bargaining agreement. I represent and warrant that I am over eighteen (18) years of age and have all necessary capacity, power and authority to grant this release and that no consent or authorization is required to be obtained in order for me to grant this release. I agree to indemnify and hold the TSIC Program Providers harmless from and against any claim, liability or obligation of any kind arising from the statements made by me in the Works, my appearance in the Works, use of my name, voice, likeness and the rights granted herein, or any a breach of any of the representations and warranties made hereunder. This grant is irrevocable, perpetual, worldwide, transferable and licensable to others. This Consent and Release is governed by Florida law and contains the entire understanding of the parties, may not be changed or terminated except by an instrument signed by the TSIC Program Providers and me.

Print Mentor Name

MIA 186154833v1

Mentor Signature

Date: _____

MIA 186154833v1.t



Mentor Application

Identifying Information

Name (First Middle Last): _____

Gender: Male Female

Date of Birth: _____ Social Security Number: _____

Employer: _____

Title: _____ Employment Start Date: _____

Are you a Take Stock in Children graduate? Yes No

Background Information

Ethnic Group: (check one)

Caucasian African American Hispanic Asian American Indian/Native American

Other (please specify) _____

Age Category: (check one) 18-30 31-40 41-50 51-60 61+

Are you married? Yes No Do you have children? Yes No

sons ____ age(s) _____ # daughters ____ age(s) _____

Second Language(s) spoken: _____

When you were a teenager, to what income group did your family belong?

low income middle income high income

Contact Information

Home Address: _____

City, State, Zip: _____

Home Phone: _____ Work: _____ Cell: _____

E-mail address _____

Career/Education Information

Highest education completed (Check all that apply):

- some school, not a high school graduate GED high school graduate
- associate's degree in _____ from _____
- technical/vocational certificate in _____ from _____
- bachelor's degree in _____ from _____
- master's degree in _____ from _____
- doctorate in _____ from _____
- other _____

Are you currently enrolled in any education or training program? Yes No

If yes, please specify: _____

Mentor Information

How would you describe your communication style?

- friendly and outgoing usually wait to be approached by someone new
- reserved until I get to know someone new

I am interested in becoming a mentor because: (check all that apply)

- I think I'd be a positive role model I like children I have the time to give
- I overcame difficulties growing up and would like to help someone else
- I think I have the personality and abilities to be a good mentor
- I am interested in making a difference in the life of a child
- I believe in the value of mentoring I wish I had had a mentor when I was a teenager

Do you have any specific training or experience in dealing with any of the following youth issues: (check all that apply, and if yes, please explain)

- drug awareness
- teen pregnancy
- teen violence
- sex/abstinence _____
- other _____

List any clubs or organizations of which you are currently a member: _____

Are there any particular problems you would prefer not to handle as a mentor?

Which of the following activities do you enjoy participating in or watching? (Check all that apply)

Sports (specifically, _____)

Handicrafts (specifically, _____)

Outdoor Life Mechanics/Science Literature Pop Culture (Movies, TV, etc)

Collecting Other _____

Is there anything else you would like us to know about you? If yes, please explain:

The undersigned acknowledges and agrees that 1) he or she is not obligated, if called upon, to perform the volunteer services herein applied for; 2) Take Stock in Children is not obligated to assign or actively seek to assign her or him a Take Stock in Children student; 3) as part of the Take Stock in Children matching process, additional information may be requested from the applicant, and 4) Take Stock in Children reserves the right at all times to terminate any match between any volunteer mentor and student for whatever cause.

I declare that all of the statements made in this application are true, complete and correct to the best of my knowledge.

Applicant's Signature

Date

As a mentor in the Take Stock in Children program, I will always act in a behavior that is in the best interest of my student. Accordingly, I pledge to each of the following volunteer policy statements. Please initial your approval next to each statement.

___ I will adhere to all volunteer policies of my local school district.

___ I will notify Take Stock in Children if I must terminate my mentor position for any reason.

___ I will notify my student or his or her school liaison or the Take Stock in Children Student Advocate if I am unable to attend a previously scheduled meeting.

___ I will not willfully arrange contact with my student off school property and not under the supervision of Take Stock in Children or school officials.

___ I will not drive my student in my car.

___ I understand that Take Stock in Children will terminate my relationship with my student if I violate any of the above policies

REFERENCES

Please print COMPLETE name, address, and relationship of three people. They must have known you for at least 2 years. Each should be in a position to evaluate your qualifications as a mentor. Please do not include family members, current boyfriends, girlfriends, or fiancées as references.

Name	Address	Zip Code	Phone #
1. _____	_____	_____	(____) _____
Relationship _____	Years Known _____		
2. _____	_____	_____	(____) _____
Relationship _____	Years Known _____		
3. _____	_____	_____	(____) _____
Relationship _____	Years Known _____		

If you are currently employed, please print the name and address of your work supervisor. If employed less than 6 months, the previous employer.

4. _____	_____	_____	(____) _____
Name	Address	Zip Code	Phone #

Liability Release/Consent for Release of Information

I do hereby affirm the above information is true. I understand if denied acceptance into a mentoring program, no reason for denial will be given. I hereby consent to The Public Education Foundation of Marion County, Inc. (local program) to release information to other entities, agencies, or individuals. I hereby release Take Stock in Children from any liability whatsoever for any information released or any acts or omissions connected with this application. I understand and consent to Take Stock in Children examining any and all available records or information from any source, to include but not be limited to criminal records.

I hereby allow Take Stock in Children to release any information compiled from my interview, references, or other sources pertaining to my application to become a mentor to Take Stock in Children. Take Stock in Children will use this information for the purpose of evaluating my ability to meet the initial criteria to serve as a mentor with a mentoring agency. I hereby release Take Stock in Children from any liability, debt, claim, suit, or obligation of any nature whatsoever should any information be obtained by any other individual, party, or entity of any nature whatsoever.

_____	_____	_____
Signature	Date	Please print your name here.