



FORGE

MENTOR APPLICATION PACKET CHECKLIST

Included in this packet:

- Mentor Screening and Matching Process explanation
- FORGE Youth Mentoring Mission, Vision, Values & Objectives
 - Mentor Application
 - Mentor Policies and Standards Agreement (including Statement of Faith)
 - Mentor Life & Interest Survey
 - History Questionnaire and National Background Application form
 - 4 Reference Letters
- Please add the following when you submit your Mentor Application:
 - Copy of Driver's License
 - Copy of Proof of Auto Insurance

Mentor Screening and Matching Process:

1. Applicant attends Mentor Orientation Class
2. Complete Mentor Application Packet is received by our staff
3. Contact will be made to set up and complete an in-home Interview
4. References will be examined and National Background Check will be filed and reviewed
5. Our staff will choose a potential mentees and send you a "Mentee Biography Sheet" for your review
6. If you accept, we'll set up a "Get To Know You" meeting for you, the youth, and their parent/guardian.
7. At that point the mentor match is launched and you will be assigned a match support specialist.

Online Applications can be completed and submitted at:

If you have any questions, please call the FYM Office at 509 438-1918

Forms may be mailed to:

FORGE Youth Mentoring
P.O. Box 1422
Richland, WA 99352

or dropped off at Columbia Community Church for our pickup



FORGE

MISSION

Connecting generations to restore hope in our communities and help young people find their God-given potential.

VALUES

- Christ-Centered: Following the Savior and modeling the Word of God
- Church-Driven: Partnering to mobilize and equip believers for mutual growth
- Entrusting Volunteers: Investing in unpaid workers for key tasks to economize programming
- Equip and Support: Quality training and ongoing encouragement for staff and volunteers
- Safety & Transparency: Protecting all participants and partners with clear guidelines and communication
- Strategic Excellence: Balancing a ministry heart and business mind to achieve our calling and potential
- Reconnect Generations: Partnering diverse ages to develop greater understanding, respect, and love
- Everyone Has a Story: Empathy leads to tangible help and a desire to learn from others brings wisdom
- Growth & Transformation: Through our mentors, kids will make lasting positive change

MENTOR REQUIREMENTS:

- Are a minimum of 21 years of age
- Have a personal relationship with Jesus Christ and be affiliated with a church for at least six months
- Participate in a Mentor Orientation Class
- Fulfill Application Process, including attending Mentor Training & Equipping Course
- Meet with your mentee once a week for a minimum of 1 hour
- Commit to this friendship for a minimum of one year

MENTOR DISQUALIFICATIONS INCLUDE:

- Have been cited for driving under the Influence (DUI) in the last 5 years.
- Have been involved in a crime against a vulnerable person (child, disabled adult).
- Cannot complete their mentoring commitment (Matches ending prematurely are shown to harm the mentee).

MENTOR OBJECTIVES

The keys to a successful and empowering mentor match is found in a few key principals:

- Empathy & Giving Value
- Listening & Understanding
- Sharing Your Life & Your Time
- Identifying Potential & Assisting the Pursuit
- Modeling Love & Faith
- Building Resilience & Hope
- Introducing them to new “worlds”
- Consistency & Faithfulness

FYM uses *The 40 Developmental Assets* tool to evaluate the effectiveness of mentor matches, and for the training and equipping of staff, mentors, mentees, and their families. Mentors build these 8 key areas of need in their mentees:

- Support
- Empowerment
- Boundaries and Expectations
- Constructive Use of Time
- Positive Identity
- Commitment to Learning

- Positive Values
- Social Competencies



FORGE

Mentor Application

Application Date: _____

Personal Information

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Marital Status: _____ Name of Spouse: _____

Name and ages of children: _____

Restrictions affecting your availability to meet with your mentee (ie; car, license, schedule, health/physical challenges):

Do you plan to live locally for at least one year? _____

Church attending: _____

Church Activities involved in currently or in the past: _____

Describe your faith journey: _____

Why do you wish to become a mentor? _____

Contact Information

Primary Phone: _____ Home Mobile Work

Alt Phone: _____ Home Mobile Work

Email: _____

Other: _____

Employment Information

Current Employer: _____

City: _____ State: _____

Length of employment: _____

Position/Title: _____

Industry/Type of Business: _____

Would you be willing to be a liaison between FYM and your company in helping us building a partnership? Yes No

How did you hear about FORGE Youth Mentoring? (check all that apply)

- Website Facebook Church Flyer Presentation: (location) _____
- Referral: (name of referral) _____
- Other: (please specify) _____

References

Relative or Spouse

Name: _____ Relationship: _____

Email: _____ Phone: _____

Employer

Name: _____ Position: _____

Email: _____ Phone: _____

Church (ie; pastor, small group leader, teacher)

Name: _____ Position: _____

Email: _____ Phone: _____

Friend

Name: _____ How you know them: _____

Email: _____ Phone: _____

Mentor Life and Interest Survey

Please complete the following information. (This survey is used to match you with a student(s) in our program.)

Do you speak any language other than English? If so, which language(s)? _____

Why did you choose your current occupation? _____

Your Favorites

Food: _____

Music: _____

Movies: _____

Books: _____

Hobbies: _____

School Subjects: _____

Arts/Music you participate in: _____

Sports you play(ed): _____

Sports you like to watch: _____

Circle any of the words below that you think described your personality in junior high/high school.

Honest	Hardworking	Caring	Funny	Quiet
Spiritual	Nervous	Adventuresome	Sensitive	Moody
Happy	Confident	Talkative	Withdrawn	Outgoing
Sad	Angry	Forgiving	Friendly	Insecure
Inquisitive	Brave	Shy	Rebellious	Silly

Circle any of the words below that you think describe your personality now.

Honest	Hardworking	Caring	Funny	Quiet
Spiritual	Nervous	Adventuresome	Sensitive	Moody
Happy	Confident	Talkative	Withdrawn	Outgoing
Sad	Angry	Forgiving	Friendly	Insecure
Inquisitive	Brave	Shy	Rebellious	Silly

Circle all the activities that interest you.

Football	Swimming	Boating	Skiing	Sculpting	Ceramics	Cooking
Baseball	Martial Arts	Canoeing	Ice skating	Crafts	Dancing	Eating
Basketball	Running	Kayaking	Snowboarding	Scrapbooking	Music	Yard Sales
Soccer	Working out	Fishing	Hiking	Reading	Theatre	Sewing
Hockey	Skateboardin g	Hunting	Rock Climbing	Writing	Singing	Knitting
Tennis	Roller skating	Camping	Parks/Walks	Painting	Movies	Gardening
Animals	Motorcycles	Cars	Board Games	Video Games	Bowling	Blogging

List any other skills, talents, hobbies, interests, etc.: _____



FORGE

Mentor Policies & Standards Agreement

Basic Confidentiality Policy

Keep confidential any personal or sensitive information about your mentee shared either by FORGE Youth Mentoring (FYM) staff or by your mentee, unless your withholding the information might endanger your mentee or others. If applicable, mentors are able to exchange information with their mentee's teacher and school counselor because the mentee's parent or guardian has signed an appropriate waiver. FYM keeps all mentor and mentee screening, interview, and case note information in a secure location that is only accessible to appropriate program staff.

Reporting Child Abuse Policy

Mentors are to report immediately any indications of abuse involving their mentee to a FYM staff member. FYM staff person will then report it to the proper authorities.

FYM's obligations to respond to allegations of abuse go beyond the State's requirements:

- Faithful response to the victim — take the allegations very seriously, respect victim's privacy, provide sympathetic concern, don't blame the victim, absolutely do not imply that the victim was in any way responsible for causing the abuse.
- Faithful response to the accused abuser — acknowledge that the person is of sacred worth. Remove accused abuser from position as a worker with youth/children until allegations are fully investigated and resolved.

Code of Behavior

We believe that all of human life is of sacred worth, perhaps that of children most of all. Therefore, FYM aims to conduct our program in a way that promotes the safety, social, and spiritual growth of all of our mentees, as well as that of the adults who also participate in FYM. To further this goal, FYM follows the reasonable safety measures found in "Elements of Effective Practice" and those gained from the Christian Association of Youth Mentoring in our selection and recruitment of workers.

The Abuse Prevention Policy and its provisions apply to all paid staff and volunteers who participate in any way with the program of FYM. Adults working or volunteering for FYM must behave in a way that reflects the Christian faith and must follow this "**Code of Behavior**":

- Adults engaged in FYM related events or activities with mentees present should never engage in *sexually suggestive behavior or inappropriate touching*.
- *Any inappropriate behavior*, including that which is sexually suggestive, by an adult toward any fellow worker or child where an imbalance of power exists between the acting adult and the other person, constitutes an abuse of power. Consent is not a defense for an abuse of power.
- *Sexual harassment is prohibited*. Sexual harassment is any unwanted sexual advance, physical or verbal demand, or sexually suggestive behavior which is perceived as demeaning, intimidating, or coercive. Prohibited behavior includes unsolicited and unwelcome contact that has sexual or coercive overtones, including: sexually suggestive or coercive communication of any kind such as obscene letters, notes or invitations, comments, threats, slurs, epithets, jokes about gender-specific traits or sexual orientation, sexual propositions.
- *Any bullying or intimidating act whether physical or verbal is prohibited*. Such acts include but are not limited to: intentional touching, pinching, brushing against another's body, impeding or blocking movement, assault, coercing sexual intercourse, visual contact, such as leering or staring at another's body, sexually suggestive gesturing, displaying sexually suggestive objects or pictures, cartoons, posters, or magazines, verbal threats, name-calling, or any unwanted gesture.
- *The following guidelines for touching are to be carefully followed*:
 - Touching should always be initiated by the mentees. The adult should respond to the mentee's need for comfort and encouragement and not base touching on their own emotional needs. Appropriate touching by an adult may involve holding hands as part of a group activity, touching only the head or shoulders, and/or a non-prolonged hug.

- Touching between an adult and a mentee shall be limited and only occur in public settings.
- A mentee's preference not to be touched should be respected by adults and others.
- Anytime an adult thinks that their own or another adult's behavior towards a mentee, either touching or verbal, may have been perceived as inappropriate, that adult shall report the behavior to the Mentor Match Supervisor.
- *Adults shall respect the privacy of mentee* when changing clothing or showering to the extent safety allows. Adults shall not be nude in front of mentee.
- All adults working with mentees shall *abide by all laws and regulations applicable* to the location of the event.

Transportation Policy

Anyone transporting the mentee during a mentoring outing must be 21 years or older and have a valid driver's license and valid insurance. The adult transporting must also have a driving record which conforms to any standards that are required by FYM. Vehicles that are used for and during events shall meet all legal requirements. To protect our mentees, our mentors, and for liability purposes, only screened mentors may transport their mentee unless:

- The person transporting the mentee is another FYM mentor of the same sex
- The person transporting has been screened by FYM and is of the same sex of the mentee
- The mentor is with the mentee during the transportation process (i.e. mentor's spouse, bus, taxi, church vehicle, etc.)

Travel and Special Activities Policy

Mentors are allowed take their mentee on a variety of activities, but need a "Special Permission Form" completed for their mentee for these type of events:

- FYM Hosted Event
- Travel event outside the Tri-Cities Area
- Special event that involves more risk (i.e. skiing, rock climbing, gun shooting event)

Special permission includes the following rules are adhered to:

- Mentors must disclose time and activity schedule, as well as contact information, in advance.
- The mentee's legal guardian must grant permission in a timely manner before the event occurs. An email or written approval by the guardian must be sent to FYM staff prior to activity.
- The parent and supervisor sign a release form allowing the mentor to take the child and authorize medical care if needed.
- *In the case of a firearms event:* Possession of illegal explosives or other weapons are forbidden unless shooting of firearms takes place at an established gun shooting business where proper training/instruction/guidelines are given to each participant.

Child Visiting Volunteer's Home

Mentors may bring their mentee for home visits under the following parameters:

- The mentor match has been active for at least 3 months
- The mentor has shown good judgment in the match.
- The mentee, parent / guardian, and mentoring coach all agree that it is a good decision.
- There is a specific reason for the match being in the home (learn a skill, family event, etc.).

Relative and Organization Policy

To protect our mentees, our mentors, and for liability purposes, mentees should not be left alone with any person other than the mentor unless the other person qualifies according to the transportation policy or the child is being left in a group setting sponsored by FYM or the mentee's parent/guardian. (i.e. FYM group activity, educational setting, etc.)

Nobody's Home Policy

In the rare situation that you drop your mentee (who is age 11 or under) off at their home and no parent/guardian, or supervising sibling is present and you have not been able to contact one of the former, the mentor should do the following: 1) contact the emergency contact numbers and arrange for pick up, 2) contact FYM staff, 3) wait with the child at the home residence in you can for as long as possible, or 4) finally, if no parent is available and you cannot reach a FYM staff member after attempting all the above, call the local police department and ask for instructions.

Gifts / Money Policy

Mentors should focus on participating in activities with mentees that are free of cost to the child/family. Special occasions may occur when an activity involving money is involved. If this is a costly activity, mentors should help mentees plan for how they can share in the cost.

- It is program policy that mentors do not give money to families. If a special need arises, and the mentor feels led to support the family, the money should be given through FYM or other agency and not directly from the mentor.
- Mentors should limit gift giving to birthdays and holidays. These gifts should be low in cost.

Conflict Resolution / Grievance

If there is conflict or a grievance, the mentor, mentee, and family have access to assistance from FYM match support personnel. If a conflict arises with the match support personnel, the mentor, mentee, and family have access to FYM administrative staff to help resolve the issue.

Alcohol and Drug Use

Breaking any of the following guidelines will lead to immediate suspension:

- Mentors are prohibited from using illegal drugs at any time during their participation in the mentoring program.
- Mentors cannot partake in any alcohol, tobacco, e-cigarettes, or drugs during their match meetings.
- Mentors should be free from the influence of alcohol and or drugs when meeting their match.
- Alcohol, tobacco, e-cigarettes, or any drugs (legal or illegal) should not be accessible to the mentee.

Rescreening Policy

Volunteers will have a new background check completed by FYM every two years.

Photo/Media Release

I consent to the use of any tapes, photographs, slides, tape recording, or any other visual or audio reproduction in which I may appear for FYM use, as they see fit. I understand that the photographs, or voice may be used by FYM as part of a program to recruit volunteers and to provide information to the community about FYM, and we release FYM from any liability connected with the use of the pictures, or voice recording as part of any such recruitment program. **Initial** _____

Social Media Policy:

Mentors and students are encouraged to use and post on or to our social media tools – Facebook, Twitter, Instagram and LinkedIn. We love to hear from our youth and mentors and have the chance to see how our work is impacting lives!

But, when posting, please adhere to the following policies:

- Please refrain from use of profane or inappropriate language – any vulgar or inappropriate language will be promptly deleted, the offending user will be blocked from contact lists, and participation in the FYM program may be revoked.
- Please do not make disparaging comments or post images or text that reflects poorly or negatively on FYM. Please tag or post FORGE Youth Mentoring only in photos and posts that are directly related to the organization and its mission – unrelated content will be removed from our site immediately and the user may be removed from our followers and/or contact lists.

I agree to follow the following Program Standards:

- Meet with my mentee weekly for at least one hour, for minimum of 1 year
- Communicate regularly with my mentee and inform parent/guardian of all activity details.
- Connect monthly with my Match Support **Coach** for encouragement, tools, and feedback.
- Refrain from any activity that may cause any physical, sexual or emotional harm to my mentee (see Abuse Prevention Policy) and to report any said activity that I may have knowledge of, to the staff of FYM.
- Seek to please God in all areas of our life i.e. words, reactions, choices of entertainment; living by scriptural principles, including those found in Ephesians 4:17-5:21.
- Share my life and words in a way that reflects the Gospel.
- Make choices that will reflect an excellent example and avoid being a stumbling block. (For example, many children struggle with drugs, alcohol and sexuality. It is essential to set positive examples and avoid confusing messages. In the area of sexuality, it is imperative to set the example of Biblical purity. Please see I Corinthians 10:23-11:1.)

- Deepen my relationship with God through prayer, scripture reading, fellowship, and church involvement.
- Attend at least TWO “Mentor Connect” Workshops each year

FORGE Youth Mentoring Statement of Faith:

- We believe the Bible to be the inspired, the only infallible, authoritative Word of God.
- We believe that there is one God, eternally existent in three persons: Father, Son and Holy Spirit.
- We believe in the deity and humanity of Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, in His present rule as Head of the Church and in His personal return in power and glory.
- We believe that for the salvation of lost and sinful men regeneration by the Holy Spirit is absolutely essential.
- We believe in the present ministry of the Holy Spirit, by whose indwelling the Christian is enabled to live a godly life.
- We believe in the resurrection of both the saved and the lost, they that are saved unto the resurrection of life and they that are lost unto the barrenness of damnation.
- We believe in the spiritual unity of believers in our Lord Jesus Christ, with equality across racial, gender, and class differences.

I have read and agree to abide by the above Program standards throughout my involvement as a mentor. If there comes a time when I cannot fulfil this, I will notify my mentor supervisor. I understand that my role as a mentor is volunteer and that I will receive no pay or reimbursement for my service to FYM.

Mentor Name: _____

Mentor Signature: _____ Date _____

FYM Staff Signature _____ Date: _____

Background Information and Check Form

The following are my responses to questions about my criminal record and personal history (if any) with descriptions to any question with a **YES** answer:

1. Have you ever been convicted or plead guilty before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations) Yes No If Yes, please explain:

2. Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense? Yes No If Yes, please explain:

3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense? Yes No If Yes, please explain:

4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? Yes No If Yes, please explain:

5. As of the date of this authorization, do you have any pending criminal charges against you? Yes No If Yes, please explain:

6. Have you ever served in the US Military? Yes No

7. If you answered YES to the above question, did you receive a DD214? Yes No If Yes, can you present the document?: Yes No

8. If you answered YES to the above question 6, did you receive an honorable discharge? Yes No If No, please explain:

9. Have you ever been investigated for sexually abusing or molesting a minor? Yes No If Yes, please explain:

10. Have you ever received treatment for alcohol and/or substance abuse? Yes No If Yes, please explain:

11. Have you ever been hospitalized for a mental illness/disorder? Yes No If Yes, please explain:

12. Have you ever received counseling or treatment for any issues related to pornography? Yes No If Yes, please explain:

My signature below indicates 1) that the statements I provided within this document are true and accurate to the best of my knowledge and ability, and 2) that I agree to allow FYM to use my information to conduct a Criminal History Background Check conducted by Pinnacle Investigations. I also agree to live by the understanding that, as a person in authority, it is my responsibility to avoid sexual or inappropriate contact with children/youth in my care, even if one attempts to initiate the contact.

Signature

Date

Please list the Counties and States that you have lived in over the past 7 years: _____

FORGE Youth Mentoring

P.O. Box 1422, Richland, WA 99352

PASTOR/CHURCH LEADER RECOMMENDATION

Pastor's Name: _____ Church Name: _____ Date: _____

One of your congregants, _____, has applied for volunteer work with our organization. *Forge Youth Mentoring is a Christian program that connects adults with "at-risk" kids and their families. The above named*

individual is being considered for involvement with one of these youth in a one-to-one mentoring relationship. Due to the difficult nature of working with at-risk kids, we need a candid recommendation from you as the Pastor/Leader. To help us determine whether this person is best suited for this type of volunteer work, we would appreciate you taking the time to answer the questions on this form as fully and specifically as you can. **Please be assured that this will be kept in confidence.** To help ensure this please *(return this recommendation form in the envelope provided) or (mail it directly to the address located at the top right corner of this form).*

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home relationship? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment _____

Does he/she have a tendency to over-commit himself/herself? _____

How would you rate him/her according to the following (mark proper column with an X):

About the Applicant	Excellent	Good	Average	Poor	Don't Know
Personal Habits					
Character					
Compassion for those in need					
Morals					
Responsibility/completes commitments					
Emotional Stability					
Christian maturity					
Receives constructive criticism					
Health					

If you were in our position, would you, without hesitation, consider this person to be a volunteer in this capacity?

Is there any reason why you would not recommend this applicant for working with a child? If yes, please explain.

To your knowledge, has the applicant ever been arrested? Y/N _____ Comment: _____

To your knowledge, has the applicant ever been accused or convicted of child abuse? Y/N _____
 Comment: _____

[] Please call me, I'd like to give some detailed information concerning this applicant.

Signature _____ Date _____

Preferred Phone # _____ Alternate Phone # _____

Please use the back of this form if more room is needed. **Your immediate response is greatly appreciated!**

FORGE Youth Mentoring

P.O. Box 1422, Richland, WA 99352

SPOUSE/FAMILY MEMBER RECOMMENDATION

Name: _____ Relation to applicant: _____ Date: _____

_____, has applied for volunteer work with our organization. *Forge Youth Mentoring is a Christian program that connects adults with “at-risk” kids and their families.* The above named individual is being considered for involvement with one of these youth in a one-to-one mentoring relationship. Due to the difficult nature of working with at-risk kids, we need a candid recommendation from you. To help us determine whether this person is best suited for this type of volunteer work, we would appreciate you taking the time to answer the questions on this form as fully and specifically as you can. **Please be assured that this will be kept in confidence.** To help ensure this please *(return this recommendation form in the envelope provided) or (mail it directly to the address located at the top right corner of this form).*

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home relationship? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment _____

Does he/she have a tendency to over-commit himself/herself? _____

How would you rate him/her according to the following:

About the Applicant	Excellent	Good	Average	Poor	Don't Know
Personal Habits					
Character					
Compassion for those in need					
Morals					
Responsibility/completes commitments					
Emotional Stability					
Christian maturity					
Receives constructive criticism					
Health					

If you were in our position, would you, without hesitation, consider this person to be a volunteer in this capacity?

Is there any reason why you would not recommend this applicant for working with a child? If yes, please explain.

To your knowledge, has the applicant ever been arrested? Y/N _____ Comment: _____

To your knowledge, has the applicant ever been accused or convicted of child abuse? Y/N _____
Comment: _____

[] Please call me, I'd like to give some detailed information concerning this applicant.

Signature _____ Date _____

Preferred Phone # _____ Alternate Phone # _____

Please use the back of this form if more room is needed. Your immediate response is greatly appreciated!

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EMPLOYER RECOMMENDATION

Name: _____ Company: _____ Date: _____

_____, has applied for volunteer work with our organization. *Forge Youth Mentoring is a Christian program that connects adults with "at-risk" kids and their families.* The above named individual is being considered for involvement with one of these youth in a one-to-one mentoring relationship. Due to the difficult nature of working with at-risk kids, we need a candid recommendation from you. To help us determine whether this person is best suited for this type of volunteer work, we would appreciate you taking the time to answer the questions on this form as fully and specifically as you can. **Please be assured that this will be kept in confidence.** To help ensure this please (*return this recommendation form in the envelope provided*) or (*mail it directly to the address located at the top right corner of this form*).

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home relationship? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment _____

Does he/she have a tendency to over-commit himself/herself? _____

How would you rate him/her according to the following:

About the Applicant	Excellent	Good	Average	Poor	Don't Know
Personal Habits					
Character					
Compassion for those in need					
Morals					
Responsibility/completes commitments					
Emotional Stability					
Christian maturity					
Receives constructive criticism					
Health					

If you were in our position, would you, without hesitation, consider this person to be a volunteer in this capacity?

Is there any reason why you would not recommend this applicant for working with a child? If yes, please explain.

To your knowledge, has the applicant ever been arrested? Y/N _____ Comment: _____

To your knowledge, has the applicant ever been accused or convicted of child abuse? Y/N _____

Comment: _____

[] Please call me, I'd like to give some detailed information concerning this applicant.

Signature _____ Date _____

Preferred Phone # _____ Alternate Phone # _____

Please use the back of this form if more room is needed. Your immediate response is greatly appreciated!

FORGE Youth Mentoring

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FRIEND RECOMMENDATION

Name: _____

Date: _____

_____, has applied for volunteer work with our organization. *Forge Youth Mentoring is a Christian program that connects adults with "at-risk" kids and their families.* The above named individual is being considered for involvement with one of these youth in a one-to-one mentoring relationship. Due to the difficult nature of working with at-risk kids, we need a candid recommendation from you. To help us determine whether this person is best suited for this type of volunteer work, we would appreciate you taking the time to answer the questions on this form as fully and specifically as you can. **Please be assured that this will be kept in confidence.** To help ensure this please (*return this recommendation form in the envelope provided*) or (*mail it directly to the address located at the top right corner of this form*).

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home relationship? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment _____

Does he/she have a tendency to over-commit himself/herself? _____

How would you rate him/her according to the following:

About the Applicant	Excellent	Good	Average	Poor	Don't Know
Personal Habits					
Character					
Compassion for those in need					
Morals					

Responsibility/completes commitments								
Emotional Stability								
Christian maturity								
Receives constructive criticism								
Health								

If you were in our position, would you, without hesitation, consider this person to be a volunteer in this capacity?

Is there any reason why you would not recommend this applicant for working with a child? If yes, please explain.

To your knowledge, has the applicant ever been arrested? Y/N _____ Comment: _____

To your knowledge, has the applicant ever been accused or convicted of child abuse? Y/N _____

Comment: _____

[] Please call me, I'd like to give some detailed information concerning this applicant.

Signature _____ **Date** _____

Preferred Phone # _____ **Alternate Phone #** _____

Please use the back of this form if more room is needed. **Your immediate response is greatly appreciated!**