

Part 1

Preuss School UCSD MENTORSHIP APPLICATION

Name _____ Title _____

Organization _____ Work Phone _____

Home Address _____ Home Phone _____

City, St., Zip _____ Sex: *M* *F*

Ethnicity _____ Email address _____

Please choose your career fields or interests by marking 1 through 4 for choices:

____ Science	____ English	____ Computers
____ Business	____ Art	____ Medical Fields
____ Environment	____ Music	____ Government
____ Mathematics	____ History	____ Other

Educational Background _____

Previous experiences with youth _____
(Scouts , church, community)

Have you ever been a mentor? ____ Yes ____ No

If so, please describe your experience.

Please circle any of the activities below that interest you. List others in the blank spaces.

Basketball	Football	Dance	Martial Arts	Games	Cars
Baseball	Camping	Hiking	Fashion	Cooking	Golf
Music	Shopping	Art	Travel	Other: _____	

Personal References: _____
Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

MENTORSHIP APPLICATION

1. The preferred gender of your mentee: _____Male _____Female

2. The preferred age of your mentee (11-16 years of age)_____

3. Specific day and time frame you are available:

4. Why are you interested in becoming a Preuss School mentor?

5. Please describe your hobbies and interests:

6. Please describe your occupation:

7. What support or training do you think you will need to be a successful mentor?

8. Describe the kind of student with whom you would like to be matched.

9. How did you hear about the program?

THANK YOU !

PLEASE RETURN THIS FORM TO:

The Preuss School UCSD
9500 Gilman Dr.
La Jolla, CA 92093-0536

Preuss School UCSD MENTORSHIP APPLICATION

This information insures that all persons at our school site can be identified at all times.

Soc. Sec. No. _____ Driver's Lic. _____ DOB: _____

Height: _____ Weight: _____ Eyes: _____ Hair: _____ Sex: M F

Notify in case of emergency: _____
(Name) (Phone)

Signature: _____ Date: _____

Have you ever been convicted of a felony?

Yes No

If yes, please describe:



As a public Charter School, we require a background check for mentors working directly with children. We will process checks for criminal violations only.

I, _____, authorize Preuss School UCSD to conduct a
(Name)
background check.

Signature: _____ Date: _____