

# CAMPUS BOUND SCHOLARS PROGRAM

## Mentor Application

*(All information will be kept strictly confidential)*

Please Print

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender/Pronouns: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Years living at this residence: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please circle your preferred contact method:

Home / Mobile / Email

Mornings / Afternoons/ Evenings

Name of Employer: \_\_\_\_\_

Address of Employer \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Briefly explain your current job responsibilities: \_\_\_\_\_

\_\_\_\_\_

Highest level of Education:

High School \_\_\_\_\_ College \_\_\_\_\_ Graduate School \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Have you ever worked with young adults? Y N

If yes, please explain in what capacity (professionally, volunteer activities, own children): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you experienced college dorm life in the United States? Y N

If yes, please elaborate (did you live in a dorm, did your children, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To ensure the safety of the program participants, Campus Bound Scholars will check personal references on every applicant. Please list three people (non-family members) who know you well and who can attest to your character, skill and dependability.

Reference 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

Reference 2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

Reference 3

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

Do you have a valid New York State license? Y N

Has your driver's license ever been suspended or revoked? Y N

Have you been convicted of a traffic violation in the last 18 months? Y N

Have you been convicted of any felony or misdemeanor? Y N

If yes, to any of the above three questions, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In making this application to be a volunteer, I understand that I must abide by Campus Bound Scholars' training procedures and protocol. Additionally, I understand that Campus Bound Scholars reserves the right to require that I successfully complete a background check (possibly with fingerprinting at a CBS approved site), the cost of which will be covered by Campus Bound Scholars. My signature below authorizes this background check. If I fail to sign, it may be grounds for rejecting me as a mentor.

*(Please be advised that you may be required to submit your social security number and/or other sensitive information in order to process your background check).*

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 mentor application forms is automatic ground for dismissal.

**Signature**

**Date**

\_\_\_\_\_

Please submit this application electronically or print it out and mail it to the following address:

Campus Bound Scholars  
292 Katonah Avenue, Suite 297  
Katonah, NY 10536

Questions may be directed to either of the following:

Amy G Peck  
[apeck@campusbound scholars.org](mailto:apeck@campusbound scholars.org)  
914-263-9970

Doreen Gadigian  
[dgadigian@campusbound scholars.org](mailto:dgadigian@campusbound scholars.org)  
914-589-3047