



VOLUNTEER/MENTOR APPLICATION

We appreciate your interest in Buenanueva Foundation, Inc. and assure you that we are sincerely interested in your experience, qualifications and interests. A clear understanding of your background will help us make the most appropriate match.

Personal Information

_____		_____		
Name		Last Name		
_____	_____	_____	_____	_____
Date of Birth	Place of Birth	Driver's License No.	State	Exp.
_____		_____	_____	_____
Address		City	State	Zip Code
_____		_____		
Home Phone		Cell Phone		
_____		_____		
Work Phone		E-mail		
_____		_____		
Have you ever been a mentor?		Where and When?		
Can you perform the essential functions of the mentor's responsibilities? YES / NO				
Have you ever been charged with sexual harassment or molestation? YES / NO				
Have you ever been convicted of a felony? YES / NO Type of offenses & dates: _____				
Is there any other fact or circumstance involving you or your background that would call into question your ability to be a positive influence on a high school youth? YES / NO				

If yes to any of the above, please explain.				

Volunteer / Mentor's Interests

_____	_____
Date Available?	Name of referral source
Describe any activities, memberships, community involvement, or experience that you feel is relevant.	

Please tell us about your expectations	

Education

_____ Name of High School	_____ Address of High School
_____ Major	_____ Degree(s) and/or Diploma(s)
_____ Name of College/University	_____ Address of College/University
_____ Major	_____ Degree(s) and/or Diploma(s)
_____ Name of other school or institution	_____ Address
_____ Major	_____ Degree(s) and/or Diploma(s)
_____ Honors/Awards	_____ Certificate(s) or License(s)
_____ Community Affiliation(s)	_____ Professional Affiliation(s)
_____ Related Educational Course(s)	_____

References

List Name of people we may contact who are qualified to evaluate your capabilities. Do not include relatives.

_____ Name	_____ Address	
_____ Home Telephone	_____ Work Telephone	_____ Cell Telephone
_____ Occupation	_____ Years Known	
_____ Name	_____ Address	
_____ Home Telephone	_____ Work Telephone	_____ Cell Telephone
_____ Occupation	_____ Years Known	

Employment History

_____ Company Name (Current or last)	_____ Address	
_____ Job Title	_____ Supervisor's Name & Title	
_____ Telephone	_____ Dates Employed	_____ May we contact this employer?
_____ Description of Duties		

Employment History Continued

_____		_____	
Company Name (Current or last)		Address	
_____		_____	
Job Title		Supervisor's Name & Title	
_____	_____	_____	_____
Telephone	Dates Employed	May we contact this employer?	
Description of Duties			

Other

How did you hear about our organization?			
_____	Advertisement	_____	Employee
_____	Company	_____	Self
_____	School	_____	Web site
		_____	VolunteerMatch.com
		_____	Other

Acknowledgement

- I understand Buenanueva Foundation, Inc.'s mission and working conduct. I agree to respect and abide its regulations and guidelines.
- I understand that prior to finalization of being accepted as a volunteer or mentor Buenanueva Foundation, Inc. conditions the offer of volunteerism upon successful completion of the screening process, reference check, submittal of TB test document and checking any background reports.
- I understand that if Buenanueva Foundation, Inc. finds that any statement I have made is not truthful, any volunteering work extended to me will be withdrawn and be subject to immediate dismissal.
- I authorize Buenanueva Foundation, Inc. to make any investigation allowed by law for mentoring and/or volunteering consideration.
- I further understand my volunteering with the organization does not constitute any form of contract, implied or expressed and such collaboration will be terminable at will for any reason either by me or by Buenanueva Foundation, Inc. upon notice of one party to the other. I will make great effort to inform the organization of my resignation one week in advance.
- I understand and agree I will not at any time during this service or after my service, disclose or disseminate any confidential information.
- I acknowledge that I have read all of the above statements and that I understand them.

Signature

Date

REV. 10/25/05