



## Connections Peer Mentorship Program Application

### Personal Information

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

Address: \_\_\_\_\_ Apt. Number: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Age on June 1, 2006: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender:  Female  Male Social Security: \_\_\_\_\_

Ethnic Origin (Optional)

- |  |   |
|--|---|
| <input type="checkbox"/> African American        | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Latino/Hispanic         | <input type="checkbox"/> Native American        |
| <input type="checkbox"/> European American/White | <input type="checkbox"/> Other _____            |

Current School: \_\_\_\_\_ Current Grade: \_\_\_\_\_

School Type:  Public  Private  Charter  Home  Other

Emergency Contact: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

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

How did you find out about the Connections Peer Mentorship Program?

\_\_\_\_\_  
\_\_\_\_\_

Why are you interested in the program?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What kinds of volunteer or paid positions have you held in the past?

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Have you worked with children before? If so, doing what?

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Through your previous work, volunteer, and educational experiences, what skills have you acquired?

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Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please answer the following questions as they apply to you and your family. This information is required by YouthCity and will be used for funding allocation; it is strictly confidential. Your answer will not affect your acceptance. Applications are judged on merit of application and interviews.

Do you participate in a free or reduced lunch program at school?

Yes  No

Does your family or household receive:

Food Stamps

Yes  No

Public Aid

Yes  No

Unemployment Compensation

Yes  No

Social Security Benefits

Yes  No

Do you live:

With parents

With relatives

With one parent

With non-relatives

On your own

Other

What is the yearly income received by your household? \_\_\_\_\_

How many people (including yourself) live in your household? \_\_\_\_\_