

4. Please list four references (please include at least one family member, one friend and one work reference):

Name _____	Name _____
Address _____	Address _____
City _____ State/ZIP _____	City _____ State/ZIP _____
Phone number _____	Phone number _____
Relationship _____	Relationship _____

Name _____	Name _____
Address _____	Address _____
City _____ State/ZIP _____	City _____ State/ZIP _____
Phone number _____	Phone number _____
Relationship _____	Relationship _____

In signing this application to be a mentor, I understand that Brightway Center routinely performs criminal record checks of all volunteers. My signature below authorizes this check be done on me.

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 grounds for dismissal.

Signature

Date

Please drop off or mail
to:

Brightway Center
PO Box 126
Smithfield, OH 43948



2511 County Road 15, Rayland, OH 43943



Mentor Matching Information

Indicate your preferences:

- Jr. High/Middle School High School No preference
 Girl Boy No preference

5. Do you prefer working with a quiet, reserved child? Yes No No Preference

6. Do you prefer working with an outgoing child? Yes No No Preference

Employer: _____ Occupation: _____

Write a brief statement on why you have chosen to participate in the mentor program.

Please list any hobbies or interests you have: _____

What clubs or groups, if any, do you belong to? _____

Please put an X by the activities you enjoy the most:

- ___ Playing sports such as _____
- ___ Watching sports such as _____
- ___ Writing
- ___ Reading
- ___ Photography
- ___ Attending plays
- ___ Going to the movies
- ___ Arts and crafts
- ___ Visiting zoos and parks
- ___ Visiting museums
- ___ Using computers
- ___ Playing games
- ___ Cooking
- ___ Hiking and seeing nature
- ___ Other _____