



# Mentor Application

## Applicant Information

Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Name on mailbox \_\_\_\_\_ Home phone ( ) \_\_\_\_\_

E-mail \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

Date of birth (mm/dd/yy) \_\_\_\_\_ Place of birth (city, state) \_\_\_\_\_

How did you learn about Evanston Scholars? \_\_\_\_\_

## Current Employment Information

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Title \_\_\_\_\_ Phone ( ) \_\_\_\_\_

E-mail \_\_\_\_\_

## Personal Information

Ethnicity

<input type="checkbox"/> African American	<input type="checkbox"/> Mexican American, Chicano
<input type="checkbox"/> Asian American	<input type="checkbox"/> Puerto Rican
<input type="checkbox"/> Asian, including Indian Subcontinent	<input type="checkbox"/> White or Caucasian
<input type="checkbox"/> Hispanic, Latina/o	<input type="checkbox"/> Other _____

Gender

Male                       Female

## Educational Information

High School Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Undergraduate Institute \_\_\_\_\_ Major(s) \_\_\_\_\_

Graduate Institute \_\_\_\_\_ Degree \_\_\_\_\_

Were you the first person in your family to attend college?  Yes     No



# Evanston Scholars

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Have you recently been through the college application process? If so, for whom and what colleges? \_\_\_\_\_

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Please list languages in which you are fluent: \_\_\_\_\_

Please check the 5 characteristics that are MOST important to you or best describe you:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Outgoing                 | <input type="checkbox"/> Adventurous        | <input type="checkbox"/> High Energy              |
| <input type="checkbox"/> Shy/Reserved             | <input type="checkbox"/> Homebody           | <input type="checkbox"/> Laid Back                |
| <input type="checkbox"/> Family Oriented          | <input type="checkbox"/> Goal Oriented      | <input type="checkbox"/> Faith is Important to Me |
| <input type="checkbox"/> Athletic                 | <input type="checkbox"/> Conversationalist  | <input type="checkbox"/> Enjoy Reading            |
| <input type="checkbox"/> Artistic/Creative        | <input type="checkbox"/> Enjoy Music        | <input type="checkbox"/> Enjoy Theatre/Movies     |
| <input type="checkbox"/> Enjoy Outdoor Activities | <input type="checkbox"/> Enjoy Volunteering | <input type="checkbox"/> Enjoy Watching Sports    |
| <input type="checkbox"/> Enjoy Travel             | <input type="checkbox"/> Enjoy Pets         | <input type="checkbox"/> Interested in Technology |

Why would you like to be an Evanston Scholars Mentor?

What characteristics do you possess that would make you a good mentor candidate?

Have you ever previously mentored a youth or teen through a formalized program or worked with teens in another volunteer capacity?  
Please list the program(s) and describe the nature of your involvement.

## Required Certifications

### Applicant Certification

I certify that the information provided in this application is, to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application. If selected as a mentor I understand that Evanston Scholars will conduct a background check prior to my work with students.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_