



BRIDGES Mentor Application (turn in by June 3 to school counselor)

Applicant's First & Last Name: _____ Date: _____

Parent/Legal Guardian's First and Last Name/s: _____

Mailing Address: _____ Current Grade: ____ DOB: _____

_____ Race/Ethnicity: _____

School: _____ Gender: _____

Applicant Email: _____ Applicant Cell phone: _____

Parent/Legal Guardian Email/s: _____

Parent/Legal Guardian Cell/s: _____

Preferred Method of Communication (CIRCLE ONE): Cell Text Email

Identify any interests, hobbies, or activities you enjoy:

What are some qualities you think are important in a mentor? Please list at least three.

Please review attached "Expectations of Lion Mentors". Are you able to commit to dates and times of mentor training, Jumpstart activities, and meeting with your mentee twice a month over the course of the school year? (Circle one, or explain):

YES/ NO CONFLICTS may include: _____

Describe the personality traits of a person or people with whom you get along well (CIRCLE all that apply):

Listener	Wise	Deep thinker	Encouraging	Energetic	
	Imaginative	Athletic	Adventurous	Outgoing	Reserved
Free spirited	Funny	Sarcastic	Intelligent	Talkative	
	Organized	Confident	Outspoken	Humble	Quiet

Other: _____



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The following may be emailed (email address below) or attached to application:

- 1) Please describe any experiences, personal traits and strengths you feel you have that would make you a good mentor (100 words).
- 2) Please explain why you would like to be a Lion Mentor. (100 words)

Please provide 1 character reference (family friend, boss, teacher, etc.)

Name _____

Email _____

Phone Number _____

Relationship to Applicant _____

List any allergies, asthma, or other medical related conditions below:

Please note any involvement with social services or judicial system:

***Please return this application to your School Counselor by Monday, June 3.**

If you have any questions about this program or application form,
please email or call:

Erin Ellis, MS
Prevention Director
Bacon Street Youth and Family Services
ellis@baconstreet.org (757)253-0111