

Student Name (First and Last):		
Age:	Birthday:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Grade:	School:	
Parent(s)/Guardian(s) Name:		
Street Address:		
City, State, Zip Code:		
Home Phone:	Cell Phone:	Work Phone:
Email Address:		
Best method AND time of day to reach parent/guardian:		
Emergency Contact (Name and Phone Number):		

1. What is your child's living situation?
 Two parent household One Parent: Female Male Other relative of child (non-parent)
 Foster Home Group Home Other: _____
2. Does your child have any medical conditions that might affect him or her participating in activities with a mentor?
 Yes No
 If yes, please describe: _____
3. Is there a person who shares custody of this child? Yes No
 If yes, are they aware of the child's enrollment in REACH One? Yes No
4. Does your child have a parent who is currently incarcerated? Yes No
5. Do you anticipate any significant life changes over the next year or have you had any in the past year? Yes No
 If yes, please explain: _____

Availability Preferences to Meet with Mentor AT School (Shade in ALL that would work for you)

	Monday	Tuesday	Wednesday	Thursday	Friday
Before School (Between 7am-8am)	unavailable				
Lunch Time (between 11 am-12:45 pm)					
After School (Between 3:15 pm-5pm)					unavailable
Is your child enrolled in any of the following programs? Circle all that apply: Before School Program After School Kids, Club Rock					

Personal Information (Preferences/Interests)

*There are no right or wrong answers. We want to know a little bit more about you to help find the best match for you to have the best experience possible. Please be honest and try your best to answer all questions.

I would describe myself as: (check all that apply)

<input type="checkbox"/> Quiet	<input type="checkbox"/> Adventurous	<input type="checkbox"/> Withdrawn	<input type="checkbox"/> Outgoing
<input type="checkbox"/> Nervous	<input type="checkbox"/> Insecure	<input type="checkbox"/> Inquisitive/Curious	<input type="checkbox"/> Friendly
<input type="checkbox"/> Spiritual	<input type="checkbox"/> Sensitive	<input type="checkbox"/> Confident	<input type="checkbox"/> Talkative
<input type="checkbox"/> Happy	<input type="checkbox"/> Moody	<input type="checkbox"/> Shy	<input type="checkbox"/> Unmotivated
<input type="checkbox"/> Other(s) (please specify) :			

Please check all activities you enjoy: (check all that apply)

<input type="checkbox"/> Animals/Pets	<input type="checkbox"/> Sports	<input type="checkbox"/> Puzzles	<input type="checkbox"/> Board Games	<input type="checkbox"/> Outdoors	<input type="checkbox"/> Other(s) (please specify) :
<input type="checkbox"/> Music	<input type="checkbox"/> Arts	<input type="checkbox"/> Movies	<input type="checkbox"/> Library	<input type="checkbox"/> Science	

Why do you want a mentor? (For advice, friendship, "big brother/big sister," to learn about college life, or as for someone to just hang out with?)

What do you want to learn from your mentor?

What kind of person would you like your mentor to be? (A good listener, active in sports, enjoys outdoors, male/female, etc.)

What are three words that would best describe you?

Please describe three things you are good at:

Is there anything that you would change about yourself or you want to improve at?

What kind of activities would you like to do with a Mentor?

Is there anything else that you would like to describe about yourself that may help us find the best mentor for you?

Is there any other information that you would like to tell us about yourself that we could *share* with a potential mentor for you?

Thank you for taking the time to fill out this application with your child and to allow your child the opportunity to be part of the REACH One Mentor Program!
If you have any questions please contact Marla Werner, REACH One Mentor Program Coordinator
email: reachone@reachwaupun.org
phone: 920.239.8542