

# **The Challenge Foundation Mentor Application**

## **Mission Statement**

The Challenge Foundation is committed to helping economically disadvantaged children attain college readiness through a seven-year educational program, beginning the summer after fifth grade.

Our philosophy is based upon the belief that a child's environment plays a critical role in determining academic success. The foundation targets students who have the desire and ability to succeed and provides them with the support of mentors, tutors, case management and a scholarship to a private, college preparatory school (either St. Mary's Academy or Colorado Academy). This holistic, long-term program provides a positive, supportive and constructive environment, both inside the classroom and outside of the school.

## **The Role of the Mentor**

The mentor has an extremely important role in our program. The mentor partners with the student's family and the foundation to encourage success and provide support. The mentor's responsibility is to establish and maintain a relationship with their student with primary emphasis on his or her academic performance and personal development.

The Role of a Challenge Foundation Mentor is to:

- Form a supportive and open relationship with the student, serving as a role model, encouraging positive character development.
- Expand the student's world and stimulate imagination and creativity by providing intellectual experiences and conversations.
- Support the student's academic life by taking an interest in the school and communicating with teachers and the foundation about academic issues.
- Treat the student as a friend and an important aspect of the mentor's life.
- Participate in Challenge Foundation activities, such as mentor training and fun group outings.
- Work as a team to establish communicative, trusting relationships with the family and the Challenge Foundation.

Time Commitment:

- Once a week phone or email contact with your student
- Twice a month visits with your student
- Attendance to 2 mentor trainings per year, fall and spring

# Mentor Application

## Background Information

*Please complete all questions so that we are able to complete a background check.*

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

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name of Spouse \_\_\_\_\_

Referred By \_\_\_\_\_

Social Security Number \_\_\_\_\_

Drivers License Number & State \_\_\_\_\_

## Educational Background

College Attended \_\_\_\_\_

Year Completed \_\_\_\_\_

Degree Received \_\_\_\_\_

Professional/Graduate School Attended

(If applicable): \_\_\_\_\_

Year Completed \_\_\_\_\_

Degree Received \_\_\_\_\_

## Occupational Information

Employer \_\_\_\_\_

Profession \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Office Phone \_\_\_\_\_

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

Fax \_\_\_\_\_

Position \_\_\_\_\_

Date Employed \_\_\_\_\_

**Legal History**

Have you ever been arrested or convicted of any crime other than minor traffic violations? Please Check: Yes\_\_\_\_ No\_\_\_\_

If yes, please explain briefly.

---

---

---

Are you or have you ever been the subject of an indicated child abuse and maltreatment report on file with the Colorado Central Registry of Child Abuse and Maltreatment, or elsewhere, or penalized for maltreatment of a child? If yes, please explain.

---

---

---

Outline any extended hospitalizations (including treatment for drugs, alcohol, or mental illness)

---

---

---

**Reasons for Interest in Mentoring**

How did you hear about the Challenge Foundation?

Have you ever been a mentor for a student? If so, for how long and through which organization?

Why do you want to become a mentor for a student?

What experiences have you had that prepare you for youth mentoring?

What are ways you would hope to help a student mentee?

What do you see as the biggest challenge to your commitment as a mentor?

What goal are you currently working on?

### **References**

Please provide the names and phone numbers of two people we have your permission to contact for references, including at least one work or school-related reference. **Please do not include relatives.**

1. Name \_\_\_\_\_

Tele. \_\_\_\_\_

2. Name \_\_\_\_\_

Tele. \_\_\_\_\_

The information contained in this update will not be disclosed to persons or institutions outside the Challenge Foundation program unless required by law.

I declare the information in my application is true, correct and complete to the best of my knowledge.

---

Name (Print)

---

Signature

---

Date

The Challenge Foundation runs background checks on all mentors in order to protect the program and the students. This requires written authorization.

I give permission to the Challenge Foundation to run any necessary background checks deemed appropriate.

---

Name (Print)

---

Signature

---

Date

**PERMISSION TO DRIVE THE STUDENTS IS GRANTED ONLY TO THE MENTORS;  
PLEASE PROVIDE PROOF OF CURRENT AUTO INSURANCE BY ATTACHING A COPY.  
THANK YOU.**

Please mail, fax, or email the application to:

The Challenge Foundation  
4545 S. University Blvd.  
Englewood, CO 80110  
Fax: 303-783-6201

[gemmachallengefoundation@yahoo.com](mailto:gemmachallengefoundation@yahoo.com)

***Thank you for applying to be a mentor for the Challenge Foundation. If you have any questions contact Gemma McDonald, Program Manager, at 303-762-8300, ext. 256 or 720-273-9999.***