

**MERCER COUNTY MENTORING**  
**VOLUNTEER APPLICATION FORM**

**VOLUNTEER'S NAME** \_\_\_\_\_ Maiden name \_\_\_\_\_

Birthdate: \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Please list previous address \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT**

Business \_\_\_\_\_

Position \_\_\_\_\_ Length of Employment \_\_\_\_\_

Business phone # \_\_\_\_\_ Can you be contacted at work? \_\_\_\_\_

**EDUCATION**

High School \_\_\_\_\_ Date of Graduation \_\_\_\_\_

College \_\_\_\_\_ Date of Graduation \_\_\_\_\_

Technical School \_\_\_\_\_ Date of Graduation \_\_\_\_\_

**MILITARY EXPERIENCE**

Branch \_\_\_\_\_

Dates \_\_\_\_\_ Type of Discharge \_\_\_\_\_

**PERSONAL**

Marital Status \_\_\_\_\_ Spouses Name \_\_\_\_\_

Spouses Maiden Name \_\_\_\_\_ Occupation \_\_\_\_\_

If you have children, please list their names and ages:

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What's your spouse's opinion of you becoming a mentor? \_\_\_\_\_

Have you ever been arrested? \_\_\_\_\_ If yes, please give further details \_\_\_\_\_

Are you experiencing any current health problems or have experienced any in the past? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Are you currently involved in any personal/family counseling or therapy? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Mercer County Mentoring requires each volunteer to have access to an automobile, a valid driver's license, willingness for you and the child to wear a seatbelt and valid auto insurance, do you have access to an automobile and agree to these requirements? \_\_\_\_\_

**AUTO INSURANCE INFORMATION**

Type of Coverage \_\_\_\_\_ Amount of Coverage \_\_\_\_\_

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Policy # \_\_\_\_\_ Insurance Agent \_\_\_\_\_

Address of Agency \_\_\_\_\_

Applicant's Driver's License Number \_\_\_\_\_

\*Also, please enclose copies of your Driver's License and Insurance Card

By signing below, I verify that all the information above is true and correct to the best of my knowledge. I also give permission for Mercer County Mentoring to contact my references, obtain background information and check my clearances

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Signature

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Date