



## **Peer Mentor Welcome Packet**

Have you always wanted to comfort someone you saw crying?  
Have you seen a classmate get picked on and thought ...this isn't right!  
Have you ever wanted to step in and say something?  
Are you the only child and wish you had siblings?

Do your friends come to you for answers? Are you someone that people feel they can trust? Do you wake up out of your sleep to answer the phone just to comfort your friends? Do you find yourself standing up for the people who get picked on the most? **THIS IS WHERE YOU BELONG!!** Join our peer-to-peer mentoring program and get the satisfaction of making a difference.

### **Do you have what it takes to change a life?**

NVEEE's peer-to-peer mentoring programs matches young adults with young students in one-on-one relationships in an effort to provide guidance, advice, support, and for the young adult to become an over all role model to their mentee. Hang out and talk about life or tackle serious issues such as bullying, peer pressures you may be receiving or witnessing, or even your home life.

### **Eligibility:**

This program is open to professional, role models, community leaders, and students in good academic standing with a GPA of 2.75 or higher.

### **Orientation:**

To ensure your success as a mentor and mentee, it is imperative to cultivate a positive group dynamic that will prepare our team to rise to the challenges of Peer Mentoring and advising. **A NVEEE STAFF MEMBER, AND COMPLETE BACKGROUND CHECKS MUST INTERVIEW ALL SELECTED PARTICIPANTS.**

### **Selection Process:**

- All applications will be reviewed by NVEEE's staff members
- Each mentor will be evaluated on their written responses as well as the enclosed

reference forms.

## NVEEE'S MENTOR APPLICATION

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
FIRST MIDDLE LAST

Address: \_\_\_\_\_  
STREET APT/SUITE

\_\_\_\_\_  
CITY STATE ZIP

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
STREET APT/SUITE

\_\_\_\_\_  
CITY STATE ZIP

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Employment Status:  Retired  Full Time  Part Time  Not Employed

### CURRENT EMPLOYER (IF APPLICABLE)

\_\_\_\_\_  
Name of Company

Address: \_\_\_\_\_  
STREET SUITE CITY STATE ZIP

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Work Phone (\_\_\_\_\_) \_\_\_\_\_ May we contact them for a reference?  Yes  
 No

## EDUCATIONAL EXPERIENCES

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SCHOOL ATTENDING \_\_\_\_\_ ACADEMIC LEVEL \_\_\_\_\_ GRADUATION DATE \_\_\_\_\_

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STUDENT ID: \_\_\_\_\_ GPA: \_\_\_\_\_

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IF IN COLLEGE: MAJOR \_\_\_\_\_ MINOR \_\_\_\_\_

Are you in good academic standing with no corrective actions pending?  Yes  No

If no, please attached separate sheet to explain. This wont automatically disqualify you

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ADVISOR'S / COUNSELORS NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

## TRANSPORTATION

Do you have access to consistent transportation? Y  N

If not, what are your plans? \_\_\_\_\_

## PERSONAL EXPERIENCES:

Have you had any experience working with youth from the Lesbian Gay Bi-Sexual Transgendered or Questioning community?  Yes  No

Have you had experience working with disabled or at risk youth?  Yes  No

Do you have any friends who are, or are you from a single parent home?  Yes  No

Have you ever been a peer mentor in any other programs? ?  Yes  No

Have you ever been bullied?  Yes  No

Have you seen someone being bullied and wished you had helped?  Yes  No

How did you hear about NVEEE and our Program?

Radio \_\_\_\_\_ TV \_\_\_\_\_ Newspaper \_\_\_\_\_ Website \_\_\_\_\_ School \_\_\_\_\_ Friends \_\_\_\_\_

Facebook \_\_\_\_\_ Twitter \_\_\_\_\_ Other Social Media Sites: \_\_\_\_\_

Were you referred by a:  Board Member  Committee  Staff  Volunteer

Are you related to someone within the NVEEE family?  Yes  No

## **BACKGROUND INFORMATION**

Have you ever been convicted of, or pled guilty or no contest to a crime?  Yes  No

Are you on any FBI | America's Most Wanted | Sex-Offenders Lists?  Yes  No

If yes, please give details on separate sheet (date, place, offense(s), disposition, etc.)

Have you ever been charged with a crime and either been placed on a court ordered probation, had adjudication withheld, or entered a pre-trial intervention program?

Yes  No

If yes, please give details (date, place, offense(s) charged, disposition, etc.)

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## **DRIVING RECORD**

Do you have a valid driver's license?  Yes  No

Have you had a suspension or probation of your license within the last three (3) years?  Yes  No

Have you been convicted of DUI?  Yes  No

### **TAKE A MOMENT TO BRAG ABOUT YOURSELF.**

**HAVE YOU EVER BEEN IN THE MEDIA FOR BEING A LEADER? HAVE YOU RECEIVED ANY AWARDS? WERE YOU AWARDED ANY SCHOLARSHIPS? ATTACH A SHORT BIO ON A SEPEARTE SHEET. FEEL FREE TO ATTACH PICTURES AND ANYTHING THAT CAN GIVE US A**

**SENSE OF WHO YOU ARE AND WHY YOU WANT TO BE A MENTOR:**

**REFERENCES AND LETTERS OF RECOMMENDATIONS**

Please list three (3) individuals you have known for at least one year, other than relatives. Please attach letters of reference with this application when you submit it. At least one letter of reference from a professor is recommended. If possible, please instruct your references to email their letter to [info@NVEEE.org](mailto:info@NVEEE.org). They may also send a hard copy in an envelope with their signature across the seal to the following address: PO BOX 23837 Fort Lauderdale FL. 33307

1. \_\_\_\_\_  
NAME EMAIL ADDRESS

( ) \_\_\_\_\_  
TELEPHONE NUMBER OCCUPATION

2. \_\_\_\_\_  
NAME EMAIL ADDRESS

( ) \_\_\_\_\_  
TELEPHONE NUMBER OCCUPATION

3. \_\_\_\_\_  
NAME EMAIL ADDRESS

( ) \_\_\_\_\_  
TELEPHONE NUMBER OCCUPATION

**REQUIREMENTS**

Applicants can be enrolled in undergraduate or graduate school, or recent graduates from those institutions, but it is not a requirement. Please keep in mind that NVEEE's Mentoring program is strictly voluntary and unpaid. If you are a student, please attach a copy of academic transcript(s) with this application when you submit it. Unofficial copies are acceptable.

CHECK LIST:

- Cover letter describing your interests, skills, and expectations of this program
- Resume                       3 Letters of Recommendations     G.P.A of 2.75 or higher
- Short Bio w/ pictures     Completed Application                       Background Check

## STATEMENT OF AGREEMENTS

I hereby authorize the National Voices for Equality, Education and Enlightenment, Inc. (herein referred to as NVEEE) to investigate all statements contained in this application and to interview the references listed in this application. I authorize the references listed to give NVEEE all facts, opinions and evaluations concerning my current employment and any other information they may have, personal or otherwise, and release all such parties, and NVEEE from any liability which may allegedly arise from furnishing information to NVEEE, including, but not limited to, any liability for defamation or invasion of privacy.

I hereby certify that all the facts and information listed on this volunteer application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application, or termination of any volunteer status. I also understand and agree that any such false, incomplete, or misleading information discovered on this application or provided in the utilization process, which is discovered at any time after I am utilized may result in having to leave NVEEE's volunteer programs.

If I am accepted into the volunteer program, I understand that such acceptance will be conditioned upon satisfactory results of a background investigation, if a background investigation is applicable.

**I certify that I have read, understand and agree with the above.**

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**DATE**

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**SIGNATURE**

If enrolled in school.

ADVISORS SIGNATURE:

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**DATE**

**SIGNATURE**

### **Submitting Your Application**

Please mail or email completed materials to our offices to be considered for NVEEE's Mentoring program.

National Voices for Equality, Education and Enlightenment

Attn: Mentoring Department

PO BOX 23837

Fort Lauderdale FL. 33307

O: (954) 561-2626 / Fax (954) 561-2626

If you have any questions, contact Tara Austin, or Jowharah Sanders

[TaraAustin@NVEEE.org](mailto:TaraAustin@NVEEE.org) | [JowharahSanders@NVEEE.org](mailto:JowharahSanders@NVEEE.org)

### **MENTORING PROGRAM INFORMATION**

NVEEE offers training sessions at its headquarters in Fort Lauderdale FL. The mentoring program is designed to provide students with an opportunity to interact with other students and professionals. It is intended to insight change in the community.

#### **General Information:**

Mentors are expected to meet with their match at least three times a month. The objective is to form a bond. All participants are subject to and bound by applicable NVEEE employee rules, including but not limited to its Confidentiality and Non-Disclosure policy and background checks.

**Application Procedures:**

Candidates must complete an application form and submit it with the REQUIRED DOCUMENTS. All application items must be submitted as a complete package. Incomplete applications will not be reviewed.

**VOLUNTARY SELF-IDENTIFICATION FORM**

NVEEE has an affirmative action program to ensure equal employment, internship, mentoring, and volunteer opportunity. We ask you to voluntarily help us measure the effectiveness of this program by answering the questions below.

The information we collect is used for statistical purposes only. This form is kept separate from the employment application, and is only accessible to staff members in the Human Resources Division and General Counsel’s Office working with NVEEE’s affirmative action plan.

Answers on this form do not bar you in any way from employment, internships or volunteer consideration.

Program(s) Applied For: \_\_\_\_\_

Name: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ zip code \_\_\_\_\_

Today’s Date: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

How did you find out about the position for which you are applying?

Advertisement \_\_\_\_\_ Where? \_\_\_\_\_

Town Hall Meeting \_\_\_\_\_ Which One? \_\_\_\_\_

School: \_\_\_\_\_ Which One? \_\_\_\_\_

NVEEE Employee: \_\_\_\_\_ Who? \_\_\_\_\_

NVEEE Web Site \_\_\_\_\_ Walk-In \_\_\_\_\_ Other: \_\_\_\_\_

Sex: \_\_\_\_\_ Ethnic Origin: \_\_\_\_\_

**Check any of the following that applies to you:**

Active in Armed Forces \_\_\_\_\_ Disabled Veteran \_\_\_\_\_ Handicapped \_\_\_\_\_