Dear Mentor:

Thank you for volunteering to be a mentor for a student who has applied to attend the Mississippi National Guard Youth ChalleNGe Academy. Your service will help us better serve our Youth. It is through selfless service like yours that we are able to accomplish our mission of providing support and productive placement for our graduates. Your concern for our youth is heartwarming and deeply appreciated. Be assured that, through your support, you are making a significant difference.

Job Description - The primary mentor will start contacting the mentee beginning Week 3 of the residential phase through letters and emails. After graduation, the primary mentor is required to meet with and/or contact the mentee 4 times a month or 4 hours a month, or a combination of the two. The mentor will assist the mentee with setting goals post-graduation and discuss the mentee’s progress with the mentee and authorized MS Youth ChalleNGe Academy employees. The primary mentor and the graduate will submit a monthly report for one year after graduation. Although the alternate (back-up) mentor is expected to support the cadet, only the primary mentor is authorized to attend the one time required mentor training which will be held at Camp Shelby MS.

Attached you will find the (1) Mentor Application, (2) Personal Reference Requests and (1) Criminal background check. Please have someone who is very familiar to you complete the references and return them with the mentor application. This mentor application is required for the applicant to attend the program. All documentation must be submitted prior to the enrollment date. The enrollment dates are January and July, depending on which class the student is applying.

Point of contact is Ms. Mary Heard at (601) 558-2239 or mheard@msyouthChalleNGe.org or fax: 601.558.2109.

Sincerely,

Rodney F McDonald
Recruiting, Placement, Mentor Coordinator
MS Youth ChalleNGe Academy
Please ensure the student’s name is printed at the top of each page.

Mentor Application

Requirements:
• Be same gender as applicant
• Be at least 21 years of age
• Live within a reasonable driving distance of applicant after graduation
• Be willing to make the 12 month commitment to applicant, after cadet graduates spend 4 contact hours per month with the cadet (i.e. go to a ball game), and send 1 report per month for 12 months
• Attend 1 mandatory mentor training to be held at Camp Shelby
  ➢ Mentors cannot be persons closely related (parent/step-parent, sibling/step-sibling/ or in-laws) but can be an aunt, uncle, grandparent, or cousin
  ➢ Mentors cannot reside in the same household as mentees

Documents in this packet:
✓ Application; pg. 1 & 2
✓ 2 Personal Reference Forms
✓ Criminal Background Check Form

Please fill out the following application and return in the provided envelope immediately.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Relationship to applicant</th>
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</thead>
</table>

Mailing Address

<table>
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<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</table>

Email Address

Home Phone _____________________________ Cell Phone _________________

Business Phone ________________________ Best contact time ____________________

☐ Male    ☐ Female    Ethnicity ________
Mentor Authorization for Release of Information (MARI)
I hereby grant to the Mississippi Youth ChalleNGe Academy, The Mississippi National Guard, and appropriate law enforcement agencies permission to check my references and civil or criminal records that include but not limited to any sex offense charges, felony convictions, alcohol or substance abuse convictions and DWI’s/DUI’s.

I also consent to being photographed and / or videotaped while attending any ChalleNGe Academy’s functions and to have such photos and or videos posted on the official Youth ChalleNGe Academy website or brochures, for official non-commercial purposes.

Confidentiality Policy
I will not share or reveal any personal identifying information of the mentee. The mentor is prohibited from discussing the mentee’s status, issues, concerns, health information or progress in public or with anyone except the case manager or employees of the MS Youth ChalleNGe Academy. Otherwise, all conversations between the mentor and the mentee shall be confidential. The only exception to this policy is if the cadet is a danger to him/her self or others. If the latter is the case, proper authorities should be notified. I understand my duties as a mentor to abide by the laws of the state of Mississippi and the laws and policies governing the preservation of confidential information.

Mentor Cadet Liability Statement
I will do my best to attend the Mandatory Mentor Training and write to my cadet while he / she is in the program. I understand and agree that I will be the one actually spending time with my Cadet, and that I must exercise care in supervising while we are together. I agree that the Youth ChalleNGe Academy will not be liable for, and I agree to hold the Youth ChalleNGe Academy harmless from any and all liability, causes of action and losses imposed on it in any way relating to or arising out of this mentoring agreement, including, but not limited to, liability for personal injuries, whether the liability, cause of action, or loss is caused by my negligence, or Youth ChalleNGe Academy, its officers, agents, servants, employees, or otherwise. I will observe all policies, guidelines, as outlined in materials sent to me and those materials given out at Mentor Training, and verbal communications with Youth ChalleNGe Academy employees.

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Mentor’s Printed Name: __________________________________________

Mentor’s Signature: ____________________________ Date: ____________________________
Mentor Interview

1. What is the reason you decided to be a mentor?

2. How long have you known the cadet?

3. In what ways do you think you will have a positive influence in his/her life?

Signature

Date
I give my consent for the MS National Guard Youth Challenge Academy to conduct a background check to include any sex offense charges, felony convictions, alcohol or substance abuse convictions to include DWI’s / DUI’s.

___________________________________________________
SIGNATURE / DATE

_____ NO RECORDS FOUND

_____ SEX OFFENSE

_____ FELONY within 5 YEARS

_____ ALCOHOL / SUBSTANCE ABUSE
   DWI’s / DUI’s within 5 years
MENTOR REFERENCE

(2 REQUIRED)

PLEASE PRINT

Instructions: Select someone who has known you for at least two years and have them fill out this form.

Mentor Name

has applied to be a mentor with the MS Youth ChalleNGe Academy, which focuses on the needs of young adults. The Potential Mentor is being considered for a position with one of our applicants. We would like your help in learning more about this person. Please answer all questions on this form to the best of your knowledge and opinion.

How long have you known the Potential Mentor? ____________ What is your relationship? ____________

Rate your idea of the Mentor in the following categories with 0 being the worst and 5 being the best. Please circle your answer.

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Additional Comments: ____________________________________________________________

Name of person providing reference (print): ________________________________________

Phone number: __________________________________________________________________

Email: _________________________________________________________________________

Signature: ____________________________________________________________________
MENTOR REFERENCE
(2 REQUIRED)

PLEASE PRINT

Instructions: Select someone who has known you for at least two years and have them fill out this form.

Mentor Name has applied to be a mentor with the MS Youth ChalleNGe Academy, which focuses on the needs of young adults. The Potential Mentor is being considered for a position with one of our applicants. We would like your help in learning more about this person. Please answer all questions on this form to the best of your knowledge and opinion.

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