



# Connections

...Because mentoring does a  
child a world of good!

Judge Thomas C. Lee, Holmes County Juvenile Court, Millersburg, Ohio 44654

## Application to Mentor

Please **complete** the following application in its entirety.

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

Address: \_\_\_\_\_  
(street) (city) (state/zip code)

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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

Email address: \_\_\_\_\_

Please list all of the people who **currently reside** in your home (either part-time or full-time) their age and their relationship to you:

	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Please attach additional pages if necessary.)

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

If yes, driver's license number? \_\_\_\_\_

Do you own a vehicle? Yes No License Plate Number: \_\_\_\_\_

Insurance company: \_\_\_\_\_ Phone: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Effective Dates: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Please list your addresses for the last 10 years:

Address: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

**(\*\*Please note the above section must be filled out completely. Please attach page for additional listings.)**

Please circle the highest level of education completed:

Primary Junior High School Secondary/High School Some College courses

Bachelors Degree Professional Degree

List your previous work experience beginning with your current employer:

Employer	Period	Duties
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please list three (3) Character References:  
(Please note that these are not permitted to be family members.)

Name/Address	Phone Number	Relationship
1. _____ _____ _____	_____	_____
2. _____ _____ _____	_____	_____
3. _____ _____ _____	_____	_____

Please list any previous and current volunteer work in which you have been involved:

Volunteer Agency/address	Period	Duties and Skills
1. _____ _____ _____	_____	_____
2. _____ _____ _____	_____	_____
3. _____ _____ _____	_____	_____

Do you have a health or physical condition which could limit you in your volunteer performance or duties?      Yes    No

If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

Would you be willing to transport a youth as part of mentoring activities?    Yes    No

Do you have current or previous contact with the Juvenile Court?            Yes    No

Have you ever been **charged with or convicted** of a felony?            Yes    No

If yes, please explain:

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Have you ever been **charged with or convicted** with any child related crime?    Yes

          No

If yes, please explain:

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**Note: As a volunteer, you WILL be fingerprinted and subject to a criminal background check. This may affect your status as a volunteer. The type and age of any incident will be taken into consideration.**

Please list any hobbies, special interests and organizational memberships you have:

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What age child are the most interested in mentoring?

6-12

12-18

Any

Why? \_\_\_\_\_

How did you learn about our mentoring program?

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I solemnly swear or affirm that the answers I have made to each and all of the foregoing questions in this application are complete and true to the best of my knowledge and belief. I hereby waive all provisions of law forbidding my physician or other person who has attended or examined me or who may hereafter attend or examine me, colleges or universities that I have attended or past employers, from disclosing any knowledge or information, which they thereby acquired relevant to my volunteer status and I hereby consent that they may disclose such knowledge or information to Holmes County Juvenile Court. I hereby waive on behalf of myself and my executors, administrators, and assigns, all claims for damage or loss to my personal property, which may be caused by an act or failure to act of the court, its officers, agents, employees and any persons associated with the Connections Mentoring Program. I assume the risk of hazardous conditions in and about the premises of the Court or in relationship to my volunteer duties and waive any and all specific notice of the existence of such conditions.

Applicants Signature: \_\_\_\_\_