

Mentor Profile Sheet

Mentor's Legal Name _____

Complete Mailing Address _____

Day Phone # _____ Email Address _____

Date of Birth _____ Soc. Sec. # _____ Race _____ Sex _____

Company/Organization (if applicable) _____

Emergency Contact Person _____ Phone _____

Address _____

Preference of Day:

Choice #1 _____

Choice #2 _____

Preference of time of Day:

Choice #1 _____

Choice #2 _____

Indicate Preference:

_____ boy _____ girl _____ no preference

_____ Black _____ Hispanic _____ Asian _____ Anglo _____ No preference

_____ a student who has experienced some difficult circumstances

_____ a student who has less problems _____ no preference

Indicate special interests which may be helpful in matching you with your mentee (needlepoint, football, computers, history, etc.).

If you prefer to work in a particular school and/or grade level please indicate your preference here:

If you have no preference, we will place you where you are most needed.

In 2007, the Texas Legislature passed Senate Bill 9, requiring fingerprint-based criminal background reviews for certain school employees. The legislation was enacted to ensure the safety of all children, teachers, and staff in Texas public schools.

Volunteers who are parents or guardians of BCISD students must undergo the name-based background check, while volunteers who do not have students currently enrolled at BCISD campuses must submit fingerprints.

Do you have a child currently enrolled in Bay City ISD? _____ Yes _____ No

Authorization of Inquiries

In order to qualify for volunteer services, I hereby authorize Bay City Independent School District to conduct a police record inquiry through The Department of Public Safety.

Signature of Applicant

Date

For Office Use Only:

Date Application Received _____ Date Mentor Trained _____

Date Authorization Obtained _____

Assigned Campus _____

Mailed to School: _____

For School Use:

Mentee's Name: _____

In Room: _____

Time: _____

Day(s): _____

Notes: