

Bucyrus City Schools

Mentor / Volunteer Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ E-mail Address: _____

Cell Phone: _____

Employer / Occupation: _____ Job Title: _____

A sincere THANK-YOU for generously giving your time to mentor/volunteer in Bucyrus City Schools! We have 3 different types of volunteers. Please check the type(s) of volunteering you prefer.

_____ 1. **Mentor** who works with one or more students providing the foundation and the encouragement that can help a young person in developing academic, social and personal skills to foster success in their future.

_____ 2. **Classroom volunteer** who works under the direction of the classroom teacher.

_____ 3. **Literacy volunteer** who works with our literacy program under the direction of our title teachers.

1. Have you ever been a mentor or volunteer with Bucyrus Schools? _____ Yes _____ No

If yes, please describe: _____

2. What experience have you had with children/youth, either personally or professionally?

3. Do you prefer to work with students of a particular grade level? If so, please indicate your preference: _____

_____ No preference, I will assist with the greatest need.

4. Indicate the days and times that you are available to mentor / volunteer: _____

5. Any special interests, hobbies, experiences or requests? _____

References

To ensure the safety of all program participants, we will be checking personal references on every applicant. Please list two people who know you well and can attest to your character, skill and dependability. At least one of the two references must be someone other than a friend or family member.

Reference 1:

Name: _____

Phone: _____ Home Work

Phone: _____ Home Work

E-mail: _____

Relationship: _____

Reference 2:

Name: _____

Phone: _____ Home Work

Phone: _____ Home Work

E-mail: _____

Relationship: _____

As a mentor / volunteer in the Bucyrus City School District, I agree to the following:

- To complete the required Bucyrus City Schools background check before mentoring/volunteering. **The Background Investigation Bureau (BIB) can be accessed at; www.bucyrusschools.org (click on "District," and the "Mentor/Volunteer Background Check." There is no charge.**
- To attend a short meeting before beginning.
- To sign in at the school office prior to each visit.
- To be on time and to notify the school office if I am unable to come.
- To engage in the relationship with an open mind.
- To ask for and accept assistance from the site-coordinator and/or the mentee's teacher
- To keep discussions with my mentee confidential.
- To notify the site coordinator of changes in my employment, address or phone number.

I understand that my volunteer services may be declined for any reason or no reason.

Signature _____ Date: _____

Completed applications should be returned to:

Marie Stuckman
Bucyrus Elementary School
245 Woodlawn Ave
Bucyrus, Ohio 44820
419-562-6089 ext. 2131
mstuckman@bucyrusschools.org

OR

Beth Constantine
Bucyrus Secondary School
900 West Perry
Bucyrus, Ohio 44820
419-562-7721 ext. 1139
bconstantine@bucyrusschools.org