

	For Office Use Only:	Date:
	Sent to:	
	Background Check	
	Completed:	
	Training Completed:	
m	Mentee Assigned:	

Mooresville Graded School District Change A Life Mentoring Program

Application to be a Student Mentor

(Please complete and return your application to your school site coordinator or MGSD Central Office)

@ 305 N. Main Street, Mooresville, NC 28115 – Tel: (704) 658-2530 or scan to email: Nancy Mangan: nmangan@mgsd.k12.nc.us

IMPORTANT: *(Background checks are done annually when you volunteer at MGSD)

Signature (Please sign here)

* Please go to our district website www.mgsd.k12.nc.us and find the link to request a background check under the tabs: Parents/Students, then click on "MGSD Volunteer Application". Or you can simply use this link below Or go to any school and ask for help completing this requirement. Applicants cannot start mentoring until the background check has been completed, approved and you have been trained. Thank You.

https://bib.com/secure-volunteer/Mooresville-Graded-School-District/

Name:				
Address:	(please print clearly			
		Zip Code:		
Cell: ()	Home:()	Work: ()		
Email: Place of Work or College Attending:				
Gender: □ Male □ Female	Age Range: 22 - 30	30 yrs. 30 - 35 yrs 40 yrs. 40 or above		
Ethnicity: □ Caucasian □ H	Hispanic □ Other	Date of Birth:/		
References: Name:	Relations	ship: Tel:		
Name:	Relations	ship: Tel:		
Availability (check all that apply	y):MonTues	WedFri.		
Mentee Age	Preference: (Please check one	e and indicate time available)		
HS (Ages: 14 - 18) Sch	ool Hours: 7:30 a.m 2:15 p.	.m. Time available;		
MS (Ages: 11 - 13) Sch	nool Hours: 7:30 a.m 2:15 p.	o.m. Time available:		
Intermediate (Ages: 9 -	• 11) School Hours: 8:30 a.m.	- 3:00 p.m. Time available:		
Elementary (Ages: 5 - 8	3) School Hours: 8:45 a.m 3	3:15 p.m. Time available:		
List your special interests or tale	ents:			
Please tell us why you want to b	oe a mentor:			
		Date:		