Purple & Gold Connections

A Mentoring Program for Waynesboro High School Students, their Families and the Waynesboro Community

High school can be a time of great transition where students can be at the onset of recognizing their potential to dream big, set lifetime paths of success, develop leadership skills, and become contributing citizens of the community. While families and school personnel assist students in gaining the necessary academic and life skills to be successful sometimes avoiding negative risks may require additional support that will make student’s positive dreams realities.

Purple & Gold Connections is a mentorship program that seeks positive adult mentors to commit for one academic year to work with a student from Waynesboro High School. Mentors need to be consistent contributors to a young person’s life willing to walk with and help them to mediate the difficult pressures of adolescents. The time commitment is

- Half-day training (September 19, 8:30 a.m – 1:00 p.m.; South River Grill, Waynesboro);
- a minimum of 4 direct contact hours per month with your mentee at school, school events or at their home throughout the month supported by indirect efforts such as phone calls as needed; and
- participation in quarterly group activities.

The benefits of being a mentor are

- that you have the potential for touching a young person’s life and impacting his/her most influential years of development;
- you’ll receive excellent training and support for your experience, so you are never alone with any issue a mentee might bring up;
- you’ll meet your match immediately at the end of the training to begin a positive experience; and
- if a JMU student you may receive volunteer, CSL hours or pre-service field hours.

Purple and Gold Connections may be able to assist with transportation and will provide gas assistance!

Purple & Gold Connections welcomes mentors at other supportive activities for their mentee and will provide opportunities for involvement. All mentors will need to complete finger printing and background checks per school policy. For consideration as a mentor please provide the following documents:

- Completed Application
- Demographic Information Sheet
- Copy of Valid Driver’s License or State Identification and Current Liability Insurance Card (for car transportation)

Return all information to:
BJ Bryson, Social Work Department, MSC 4303, Harrisonburg, VA 22807 or drop it off at the Social Work Department located on the second floor - HHS 2126
Purple & Gold Connections
VOLUNTEER APPLICATION

Mentors must be 18 years of age, a high school graduate (or equivalent) with reliable transportation and auto liability insurance. All mentors must complete finger printing and background checks per school policy. Demographic information is gathered in order to make the best match between mentor and mentee.

Please print

Last Name: _________________________________ First Name: __________________________ MI: ______

Street Address: __________________________________________________________________ Apt#: _______

City: ________________________ County: ____________________ State: _________ Zip Code: ______________

Previous Addresses; if any (within last five years) ____________________________________________________________________________________________

______________________________________ ___________________________________________

Date of Birth: ________________ Male _______________________Female _____________________________

Email: _________________________Home Ph #: ________________________ Cell Ph#: _______________

Employer: ______________________________ Address: __________________________________________

City: ______________________________ State: __________ Zip: ___________

List the names/ages of household members (includes roommates whom you live with):

______________________________________ ___________________________________________

______________________________________ ___________________________________________

Do you have a driver’s license? _____Yes _____No

Driver’s License # ____________________ State: ________ Expiration date: ______________

Possession of a driver’s license or car is not a requirement to participate in the program but is required if you will be transporting a youth in any vehicle you are operating.

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The purpose of this program is to help Waynesboro High School Students successfully complete their high school education and continue on to successful college experiences. This help will be provided through a long-term program of systemic support from the sophomore through the senior years by way of one on one mentorship, targeted short-term skill development workshops, and involvement with families. This program is a partnership of Waynesboro High School, the local community, and James Madison University.
REFERENCES
List (3) people, other than a relative or significant other who have known you at least two years and can vouch for your character, reputation and morals. Please include employer or supervisor, past or present. (References will be contacted. Information will remain confidential.) We suggest you contact your references and encourage them to respond promptly.

1. Name _______________________________ Phone ___________________________
   Address _____________________________________ City __________________ Zip _______
   Email: _________________________________________________________________

2. Name _______________________________ Phone ___________________________
   Address _____________________________________ City __________________ Zip _______
   Email: _________________________________________________________________

3. Name ______________________________ Phone ___________________________
   Address _____________________________________ City __________________ Zip _______

List at least one, preferably more, person(s) to contact in case of an emergency
Name ______________________ Address _______________________ Phone _____________
Name ______________________ Address _______________________ Phone _____________
Email: _________________________________________________________________

I understand that:
   1) The references listed may be contacted by mail, telephone, or email.
   2) I am in no way obligated to perform any volunteer services at this time.
   3) The information I provided may be used to conduct a background check, including a driving records check, criminal background check, and other records required by the school, local, state, or federal law for volunteers working with youth.
   4) Purple and Gold Connections attempts to make appropriate matches between mentors and mentees as they join the program. Where a match is not available, you will be notified.
   5) As part of our enrollment process, we will be asking you to provide additional personal information prior to making any recommendations for assignment.

Signature:______________________________ Date: ______________________

Please note: Mentor training and introduction with mentees will occur September 19, 2009 – Save the date!

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CONSENT TO RELEASE AGREEMENT
I, the undersigned, certify that all statements contained in my Volunteer Application herein are complete and correct, and that:

1) present and former employers, community organizations, mental health professionals, colleges and universities are authorized to furnish information concerning the applicant (potential mentor), and are released from all liability for furnishing such information;
2) the addressed police departments, court house(s), state or federal agencies to furnish any criminal information or traffic violations they may have on record or otherwise, and to hereby release the addressed institution and all individuals connected therewith from any and all liability for damage whatsoever incurred in furnishing such information.
3) Any misrepresentation or omission made by me in this application or any supplement hereto will be sufficient grounds for immediate termination.

I understand that all of the information which I have given and will give to the professional staff of Purple and Gold Connections may be verified; that may examine my background including psychological counseling and any records of law enforcement agencies which pertain to me; that all information will be held in the strictest confidentiality, except that it will be shared with a guardian who has responsibility for a mentee who is actively being considered for a match with me, and that it may be used to determine my stability for participation in the program. I certify that I have read and understood each paragraph of this document.

STATEMENT OF UNDERSTANDING
I hereby acknowledge that:

1) The references I listed may be contacted by mail, telephone, or email;

2) This application in no way obligates me to perform any volunteer services;

3) The information I provided may be used to conduct a background check, to include driving record check, criminal background check, and other records where required by local, state, or federal law for volunteers working with youth;

4) Purple and Gold Connections is not obligated to match me with a youth;

5) As part of this process, you may be asked to provide additional personal information prior to any recommendations for assignment.

Print Name

Signature        Date

Return all information to:
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Personal Demographic Information for Matching

Mentees will complete a similar form

How did you hear about our program: __________________________________________
I am a Waynesboro Community Member _______ or JMU student _______

Personal Information

1. Gender: Female _____ Male _____
2. Date of Birth: _____ / _____ / _______
3. Ethnic Background: Asian _____ African American _____ Caucasian _____ Hispanic/Latino _____ Multi-Racial _____ Native American _____ Pacific Islander _____ Other: _________
4. Do you speak any language other than English? Yes ___ No ___ Which language(s) _______
5. Education Level: GED ____ High School ____ Some College ____ Associate Degree ____ Bachelor Degree ____ Master Degree ____ Doctorate/ Professional Degree ____
6. I don’t like sports: ________ I don’t know much about sports, but I can participate: __________ I like the following sports and can participate: ______________________________________
7. I like outdoor activities: ________ I don’t like outdoor activities: ________
8. My hobbies are: ____________________________________________________________
9. A fun day for me would be: __________________________________________________
10. Last book I read for enjoyment: ____________________________________________
11. My favorite childhood book: _________________________________________________
12. My favorite color is: _______________ The best time of the day is: ______________
13. If I were an animal I’d be a: ____________________
14. My strongest personal value is: ______________________________________________
15. Rate your ability to work with computers: Excellent ____ Good ____ Fair ____ Poor ____
16. Do you have access to an automobile? Yes____ No ____
17. Have you served as a mentor before? Yes ___ No ___ If yes, where? ________________
18. I would like you to know:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________