



Youth Mentors
of the Pee Dee

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THINKING OF BECOMING A VOLUNTEER MENTOR?

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youthmentorsofthepeedee.com

Several hundred volunteers are serving as friends, companions and confidants to single parent children in the Pee Dee Area...children who need someone to be with, to talk to, to help them grow into good citizens. These children are usually fatherless through death, divorce of separation and they lack that adult influence which can make **THE** difference in their lives.

We don't have enough volunteers for our boys and girls...not nearly enough. And we need you in our organization. But, to be honest with you, there are some big "IF's" attached. We need you if you can relate well to a youngster. We need you if, most importantly, you are willing to make a commitment to see a child regularly, to offer your sincere friendship, and to avoid letting a child down unnecessarily. Problems will arise in a relationship, but a well-founded, steady friendship can do much to overcome these. Providing that these "if's" apply to you, please complete and return the application because we do need you in our organization.

Here is what to expect. Your application will be carefully considered by our screening committee which will check your references and go over your general background. Several weeks may pass after you send in your application; the screening committee is careful in its operation. Following this, you will be called for an interview. The Executive Director of our agency or another staff member will talk with you about yourself and about our program, Following this interview, you will be notified by letter if you have been accepted as a volunteer Mentor.

If you are accepted the Youth Mentor staff will begin going over all information about you, your interest and attitudes, and will attempt to identify a boy or girl in our program of parallel interest and appropriate age who would respond well to you and with whom you could help. This process of "matching" takes time because it is done with care. We will contact you concerning children we are considering for you and will meet with you to determine which particular child you would like to work with.

We hope that you feel positively toward applying as a Volunteer Youth Mentor and that you are the kind of person willing to give of yourself to a child who needs help. We take this business of helping children very seriously and we want you to take it seriously too.



Think of the possibilities. **All Kids Count**

APPLICATION FOR CONSIDERATION AS A VOLUNTEER MENTOR

Name _____ Home Address _____

Home Phone _____ Cell Phone _____ Age _____ Place of Birth _____

Occupation _____ Business Address _____ Business Phone _____

Fill in number of years of school completed: Elementary _____ High School _____ Trade _____ College _____

Family Status: ___ Single ___ Separated ___ Married ___ Divorced ___ Widowed

How long have you been married? _____ Number of children in your family _____

Please list their names, sex and age:

_____	_____	_____	_____	_____	_____
<i>Name</i>	<i>Sex</i>	<i>Age</i>	<i>Name</i>	<i>Sex</i>	<i>Age</i>
_____	_____	_____	_____	_____	_____
<i>Name</i>	<i>Sex</i>	<i>Age</i>	<i>Name</i>	<i>Sex</i>	<i>Age</i>

Name of Church or Synagogue you are affiliated with? _____

What changes in your family or vocation do you anticipate within the next year? _____

Describe any serious physical or psychiatric illness you have had within the past five years. _____

How did you hear about Youth Mentors? _____

What experience have you had working with children? _____

Why do you want to become a volunteer Mentor? _____

What age group are you interested in working with? ___ 8-10 ___ 11-13 ___ 14-17

Have you ever been a *Youth Mentor* or *Big Brother* or *Big Sister* before? ___ Yes ___ No (If Yes, list the name of the agency) _____

What is your spouse's reaction to the possibility that you may become a volunteer Mentor? _____

How do you spend your leisure time? _____

Do you have any special skills or hobbies? _____

What Service or Fraternal Groups do you belong to? _____

List the names of members of the Youth Mentor's whom you may know: _____

List the names and addresses of three (3) references:

_____	_____
(Name)	(Address)
_____	_____
(Name)	(Address)
_____	_____
(Name)	(Address)

Date: _____ Signature: _____



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AUTHORIZATION FOR:

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RELEASE OF CONFIDENTIAL INFORMATION

youthmentorsofthepeedee.com

Name of Child: _____

Name of Parent or Legal Guardian: _____

Address: _____ City: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____

In order for the Youth Mentors of the Pee Dee to provide responsible and professional services in its programs, it is necessary for us to retain the right to receive and/or disclose information when in the agency's opinion, such action would be in the best interest of the child. The undersigned acknowledges that the agency's discretion will determine when the best interests of the child mandate such disclosure and/or receipt of information.

Signature of Parent or Legal Guardian: _____

Relationship to Child: _____ Date: _____

Witnessed by: _____



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