



COMMUNITIES IN SCHOOLS OF DELAWARE
 101 W. Loockerman St., Suite 2A – Dover, DE 19904
 302-678-4929 – www.cisdelaware.org

Volunteer / Mentor Application

1. BACKGROUND INFORMATION

Name: _____ Gender: _____
 Address: _____
 City: _____ Zip: _____
 Home Phone: (____) _____ Business Phone: (____) _____
 Fax/Cell Phone: (____) _____ Email address: _____
 Age: _____ Date of Birth: ____/____/____ Race: _____
 Emergency Contact: _____ Phone: _____
 Ethnic Background: _____
 Marital Status: _____ Spouse's Name: _____
 Number of Children: _____ Ages: _____
 Other Names Used: _____

2. EDUCATION

High School: _____ City/State: _____
 Dates Attended: _____ to _____ Graduated? _____
 Post-High School: _____

School	Major	Dates Attended	Degree
_____	_____	_____	_____
_____	_____	_____	_____

3. EMPLOYMENT HISTORY

Present Occupation: _____ Dates: _____ to _____
 Employer: _____
 Address: _____
 Phone: (____) _____ Ext. _____

4. MILITARY SERVICE

Branch	Dates	Type of Discharge
_____	_____	_____
_____	_____	_____

5. REFERENCES

List 3 references, including 1 relative and 1 co-worker you have known for at least 2 years.

- 1. Name: _____ Relationship: _____
City, State: _____
Home Phone: (____) _____ Business Phone: (____) _____
Email Address: _____ Years Known: _____

- 2. Name: _____ Relationship: _____
City, State: _____
Home Phone: (____) _____ Business Phone: (____) _____
Email Address: _____ Years Known: _____

- 3. Name: _____ Relationship: _____
City, State: _____
Home Phone: (____) _____ Business Phone: (____) _____
Email Address: _____ Years Known: _____

6. LEGAL HISTORY

Have you ever been arrested? _____
If yes, please explain. _____

Have you ever been investigated/and or charged with child abuse or neglect? _____
If yes, please explain. _____

7. PREVIOUS APPLICATION

Have you ever previously applied to be a volunteer with CISDE? _____
If yes, please explain. _____

Have you had any experience working with children (volunteer, paid, etc.)? _____
If yes, please describe. _____

Additional Comments _____

Basic Mentor Requirements:

- Complete Mentor Application
- Attend Mentor Orientation
- Commit to one full school year (September through May)
- Background Check

PLEASE READ BEFORE SIGNING:

CISDE does not discriminate according to race, religion, physical handicap, sexual preference or economic status.

I hereby apply to volunteer with CISDE. I understand CISDE may interview me about my background, motivation, expectations, and other personal qualities that might have a bearing on whether I would be an appropriate volunteer.

I agree to undergo a background check. I understand that CISDE will review references and will investigate any and all facts concerning my qualifications for becoming a volunteer.

I certify that all of the information provided by me in this application is complete, true, and accurate. I acknowledge that intentional omission or falsification of information will be cause for refusal of placement or immediate dismissal at any time during the period of my placement.

I understand that CISDE will take the best interests of the children into consideration first. Further, I understand that I am not obligated, if called upon, to perform the volunteer services applied for and CISDE is not obligated to assign or to actively seek to assign me to a volunteer position.

I understand that the statements I make to the staff of CISDE will be held confidential within CISDE, unless disclosure is required by law. Specifically, I understand that incidents of child abuse, past or present, or threat of harm to oneself or others are issues that must be reported to proper authorities.

I agree to keep information discussed with me regarding a potential match confidential. I will not discuss this information with any person other than the assigned professional staff of CISDE.

I understand that my application will not be considered unless it is complete and signed and until the required supplemental information is submitted and completed.

I agree to notify CISDE immediately of any changes in the information provided in the application process, including, but not limited to legal status, job change, address change, telephone, name change, or marital status.

This application and any additional information gathered will remain the property of CISDE.

Signature: _____ Date: _____

Printed Name of Applicant: _____