



2022 Day of the Mentor Mentor Application

Name: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____ Gender: M / F
 Phone: _____ Mobile: _____ Email Address: _____
 Company: _____ Title/Position: _____
 Employer: _____
 Address: _____
 City: _____ State: _____ Zip: _____

List hobbies and interests:

If possible, I prefer my Mentee to be in the following age range:

___ Elementary School (3rd - 5th Grade) ___ Middle School (6th - 8th Grade) ___ High School (9th Grade)

My t-shirt size is:

Adult Small Adult Medium Adult Large Adult XXL Adult XXXL

How did you hear about Day of the Mentor?

Please list two references (other than relatives) who have known you for at least a year. One of these references should be someone you have known in a professional capacity.

*References listed will be sent a link and asked to complete a reference check form which speaks to your suitability to serve as a Mentor for the day.

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Email: _____

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Email: _____

By submitting this form, I agree to allow Big Buddy and event sponsors to use your name, voice, photograph, likeness, and/or biographical material in any and all advertising or publicity material relating to Big Buddy and Day of the Mentor without additional financial or other compensation or notification.

Signature

Date

*Please email completed form, along with a copy of your valid driver's license and proof of car insurance, to the Big Buddy office no later than 5:00 pm on December 31, 2021 .
bigbuddy@bigbuddyprogram.org*