



[www.bhci.org](http://www.bhci.org)



**Barrio Logan College Institute**

## How to become a BLCI Mentor:

1. Fill out and mail in application to **1807 Main St., San Diego, CA 92113**.
2. RSVP by phone (619) 232-4686 or email ([mentors@bhci.org](mailto:mentors@bhci.org)) to attend Orientation
3. Schedule an interview with Mentor Coordinator
4. Take LIVE SCAN fingerprinting form from BLCI to area agency (list provided) for a background check.
5. After notification of clean background (within one week of fingerprinting), the Mentor Coordinator will call you to set up a meeting between the Mentor Coordinator, your mentee's parents if available, and finally....**MEET YOUR NEW MENTEE!!!!!!!**

--After that, it's a piece of cake--

6. Spend six hours a month for the next year building a relationship of trust and respect with your young friend, helping him/her set goals, explore colleges and careers, better the community, and raise his/her self-esteem.
7. Participate in quarterly BLCI group events and outings' ranging from Padre's and Gulls games to beach volleyball to museum visits and beach clean-ups. Workshops will also be available.
8. During the last month of your "mentoring" experience, review with your mentee their goals, making sure they're on track to reach them and offer strategies and tips to accomplish them.
9. Pat yourself on the back for a year well spent. BLCI will pat your back too at our end-of-the-year bash. Think about what you're going to do next to make the world a better place.



# BLCI

## MENTOR APPLICATION

Questions? • Mentor Coordinator • (619) 232-4686 • [mentors@blci.org](mailto:mentors@blci.org) •  
Send completed apps to: 1807 Main St. San Diego, CA 92113

### GENERAL INFORMATION

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Birthplace \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Years of Residence at Present Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_ How Long? \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Leisure time activities \_\_\_\_\_

Special Skills and hobbies \_\_\_\_\_

Languages Spoken \_\_\_\_\_

What kind of student would you like to mentor?  
Proficient English \_\_\_ Limited English \_\_\_ No Preference \_\_\_

**EDUCATION**

	CITY/STATE	YEARS COMP	DEGREE
High School	_____	_____	_____
College	_____	_____	_____
Other Colleges	_____	_____	_____

	YES	NO
Is your automobile in safe mechanical condition?	_____	_____
Do you have a valid California Drivers License?	_____	_____
License# _____ State Issuing License _____		
Do you carry liability and property damage insurance on your car?	_____	_____
Have you ever been arrested? (Exclude arrests involving traffic violations)	_____	_____
Do you object to the BLCI checking with appropriate public agencies for matters of public record regarding your background?	_____	_____

Please list names, address with zip codes of 2 persons (other than relatives) who have known you for at least 2 years, and who will serve as a character reference.

1. Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Address \_\_\_\_\_

2. Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_

**Questions**

Why do you want the experience of being a BLCI mentor?

Do you have any other volunteer experiences that have had an impact on your life?

What special skills and interests do you have?

What type of help would you like to give to a young person?

Have you ever worked with this age group before? What difficulties do you anticipate?

What type of expectations do you have for your student? What expectations do you have for your own experiences in the program?

Describe the type of child for whom you feel your interests, talents, and personality would best be suited:

Tell us something you'd like your mentee to know about you:

Within the next year, do you know of, or have any reasonable expectation of any future changes in your family status, vocation or residence, which might have some bearing on a long range relationship with your student?

# Barrio Logan College Institute

## Mentor Questionnaire

Full Name: \_\_\_\_\_

Many of the students have specific talents. Some are good writers and want to become writers when they grow up. Others scientists. Others are both. So in the next few titles, there are a few categories along this line of thinking. You can check off all, a few, or just check one box. If you have several preferences, please number them from 1 through 10, where 1 is your first preferable choice.

### *Category: (interests of children)*

A Dancer:_____	An Engineer:_____	A Writer:_____
A Mathematician:_____	A Teacher:_____	A Singer:_____
An Athlete:_____	A Counselor:_____	A Musician:_____
A Deal Closer:_____	A Graphic Artist:_____	A Leader:_____
An Activist:_____	A Public Speaker:_____	A Historian:_____
A Detective:_____	A Performance Artist:_____	A Law Officer:_____
A Politician:_____	A Fireman:_____	A Lawyer:_____
A Philosopher:_____	A Doctor:_____	Other:_____

### *Personality Traits:*

Introverted:\_\_\_\_\_ Extroverted:\_\_\_\_\_

As child, what did you want to be as a "grown up"? \_\_\_\_\_

What were your dreams? \_\_\_\_\_  
\_\_\_\_\_

Have you other dreams now? \_\_\_\_\_  
\_\_\_\_\_

Were you parents divorced? \_\_\_\_\_

Were you part of a: lower income \_\_\_\_\_ higher income \_\_\_\_\_ mid income \_\_\_\_\_ family?

Do you have any siblings? \_\_\_\_\_

If so, how many? \_\_\_\_\_ How many sisters? \_\_\_\_\_ How many brothers? \_\_\_\_\_

Are you the eldest \_\_\_\_\_ youngest \_\_\_\_\_ or middle child \_\_\_\_\_

Tell us why you would like to mentor a child in the particular categories you have chosen?

## BLCI MENTOR PARTICIPATION AGREEMENT

*As a BLCI ONE to ONE Mentor, I Agree to:*

1. Make a one-year commitment to mentor a mentee.
2. Complete the BLCI mentor screening process, which includes a background check and fingerprinting.
3. Attend the Mentor Orientation/Training.
4. Meet with my student weekly, bi-weekly, or monthly for a total of 6-8 hours during the month.
5. Never spend the night with my mentee.
6. Not take my mentee out of San Diego County, or keep my mentee out past 8:00 P.M. without prior permission from the Mentor Coordinator and the mentee's parents.
7. Make 2-3 check-in calls a month to the student/family.
8. Attend at least 3 mentor/student group events throughout the year.
9. Attend, if possible, at least one session of the After-School Program.
10. Notify the Mentor Coordinator of any circumstances preventing me from fulfilling my commitment to my mentee.
11. Not use illegal drugs.
12. Not use alcohol in close proximity of meeting with my mentee.
13. Never talk about intoxicants or drugs, or negative behaviors in a positive way.
14. Never use sexual innuendo or tell "off color" jokes.
15. Minimize the exchange of gifts (and I will contact Mentor Coordinator if clarification needed).
16. Agree to adhere to "rules of confidentiality and child abuse reporting" as outlined in the mentor-training manual (contact mentor coordinator with suspicions).
17. Adhere to program's "touching policies" and "boundary policies" (as outlined in the mentor training manual).
18. Agree to adhere to all of the program policies and procedures as outlined in this training manual, and to sign the "Mentor Participation Agreement".

\_\_\_\_\_  
Print Name

\_\_\_\_\_+++\_\_\_\_\_

# Barrio Logan College Institute

## Mentor Release Form

### AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION FOR THE BARRIO LOGAN COLLEGE INSTITUTE.

I understand that it will be necessary for the Barrio Logan College Institute to investigate my personal background. I hereby give my consent for this information exchange and authorize the release of any information requested by the Barrio Logan College Institute. The agencies to be contacted may include employers, courts, police/law enforcement agencies, social services, and any other person or agencies with which I have had contact. I understand that this information will remain confidential.

---

**Signature of Mentor**

---

**Print Name**

---

**Date**

Please send completed application to:

[mentors@blci.org](mailto:mentors@blci.org)  
**Barrio Logan College Institute**  
**1807 Main St.**  
**San Diego, CA 92113**  
(619) 232-4686