



AGLMN MENTOR PROGRAM

Parent and Child Consent Form

Dear Parent or Guardian:

You play a very important role in the success of the mentor relationship.

Please complete the following information to help us learn more about your child.

Mentor: _____

Name of Child/Youth _____

Phone Numbers: _____

Address: (Physical) _____

(Mailing) _____

City/State/Zip: _____

Email _____ Birth date: _____ Sex: M F

Ethnicity: Native American _____ African American _____ Latino/Hispanic _____
Pacific Islander _____ Caucasian _____ Other _____ *please specify*

Name of Parent/Guardian: _____

Describe your child's personality: _____

Has your child received services from AGLMN in the past? If yes, please explain:

Describe your idea of a mentor that would best suit your child: _____

Would you have a concern regarding the ethnicity or sexual orientation of a mentor? If yes, please explain _____

What do you hope your child will gain from attending the mentorship program?

Do you have any concerns about your child having a mentor? If yes, please explain. _____

Are there any circumstances or areas of concern that should be considered when your child attends the AGLMN Mentorship Program? If yes, please explain. _____



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The AGLMN Mentor Program will provide a mentor who will give attention and support to your child. We are asking for your consent to allow your child to participate in the program.

Child's Name: _____ () May () May not
(check one)

Participate in the AGLMN Mentor Program.

Date: _____ Signature of Parent/Guardian: _____

Parent/Guardian (please print): _____

(Below is youth portion to sign)

I, _____ () Agree () Do not agree
(check one)

to participate in the AGLMN Mentor Program.

Date: _____ Signature of Youth: _____

Please list a friend or relative's name and phone number (someone who will always know where to reach you):

Name: _____

Phone Number: _____

Photograph Release

Part I

I hereby authorize A Girl Like Me Network to photograph my child.

Print name: _____

Sign name: _____ Date ____ / ____ / ____

Part II

I also authorize A Girl Like Me Network to use the photographs in their newsletter, website, advertisements, annual reports and Facebook page as well as other agency publications.

Authorizing Signature

____ / ____ / ____
Date

Witness Signature

____ / ____ / ____
Date

Mentor Program

Participant Waiver and Release for Minors

_____ has my (our) permission to participate in A Girl Like Me Network Mentoring Program activities. I understand and acknowledge that some activities may be outdoors and can pose risk.

I (we) as parent(s) or guardian(s) of the minor, do hereby, give my daughter, myself, my heirs, executors and administrators, release and forever discharge A Girl Like Me Network and all officers, directors, employees, agents and volunteers of the organization acting officially or otherwise from any and all claims, demands, actions or causes of action which in any way arise in the minor's participation from any of A Girl Like Me Network events or activities.

In case of illness or accident, permission is granted for emergency treatment to be administered. It is further understood that the undersigned will assume full responsibility for any such action including payment of cost.

Please list any known allergies, medicine reactions or any physical condition that should be made known to any treating physician. **(If none, please write none)**

Name

Signature

List your favorite(s) in the following categories.

1. Movie _____

2. Band/Singer _____

3. Movie Star _____

4. Book _____

5. Food/Meal _____

6. Store _____

7. Friend _____

8. Outdoor Activity _____

9. Indoor Activity _____

10. Place _____

11. Sport/Hobby _____

12. Relative _____

13. Holiday _____

Dear Future Mentee, please complete the following sentences helping us to learn more about YOU.

The thing I like least about school is:

Do you have any pets, what are their names?

What Career or job are you most interested in right now?

Happiness is:

What is special about me is:

A Girl Like Me Network Mentoring Model

We are thrilled at AGLMN that you are considering registering your child for our mentoring program. Our goal is to help your child become a stronger leader, and help her set and achieve goals.

A Girl Like Me Network mentor is a caring adult that will guide the participants as they navigate through the program and beyond.

We want parents to know that we are an additional support and will handle your daughter(s) with care and consideration.

As we provide a safe space for your child to freely share their goals, feelings and ideas; we also want you to know what we will be discussing.

In the program, we will focus on the following:

- Goal Setting
- Bullying
- Leadership Skills
- Teamwork
- Nurturing her confidence
- Positive Self Talk
- Problem Solving
- Importance of Education
- Friendships
- Career Goals

Each girl will be provided with a pen and journal to jot down their thoughts as they grow through the program. Each week there will be interactive activities and positive communication. As a bonus, the girls can expect to meet some high school graduates and discuss relatable experiences. We will also have a day where local successful career women come in and chat about their journey. In the middle of the program, we will take a day to go out in the community and do a team bonding event.

We will also have a mid-week check in with the girls to see how their current week is coming along. As the program comes to an end, we will host a celebration ceremony to congratulate the girls for completion.

The mentor and mentees meet in a positive and socially appropriate location.

Mentoring Program 03/13/2021

WEEK ONE 03/13/21

Who are YOU

Learning who you are and being okay with it

WEEK TWO 03/20/21

Goal Digging

What direction am I headed in and how do I get there

WEEK THREE 03/27/21

Schooling YOU

How to navigate through school and stay positive.
Hear from recent High School graduates and learn what to expect

WEEK FOUR 04/03/21

Boundaries

Learn healthy boundaries for a better YOU

WEEK FIVE 04/10/21

Because of HER I can

Learn from women who are doing what we LOVE

WEEK SIX 04/17/21

Celebrating YOU

Parents/Guardians are welcomed to assist with celebrating YOU and the completion of the program