



LADIES UNITED BY HOPE

*Empowering women through supportive and
transformative mentorship.*

Volunteer Mentor Application



**Personal Information**

- Full Name: _____
- Date of Birth: _____ (Month) _____ (Day) _____ (Year)
- Phone Number: _____
- Email Address: _____
- Home Address: _____
- City _____ State _____ Zip _____

Employment/Occupation

- Current Employer: _____
- Job Title: _____
- Work Address: _____
- Work Phone Number: _____

Background & Experience

1. **Why are you interested in becoming a mentor for this program?**

2. **Please describe any previous mentoring, coaching, or leadership experience.**

3. **What skills or qualities do you believe are essential for a mentor, and how do you embody them?**



4. Do you have experience working with young women or youth programs? If so, please elaborate.

5. Are there areas of mentoring that you are passionate about? (Check all that apply)

- ☐ Career Development
- ☐ Academic Support
- ☐ Personal Growth
- ☐ Life Skills
- ☐ Faith/Spirituality
- ☐ Other: _____

Availability & Commitment

1. How many hours per week/month can you commit to mentoring? _____
2. Are you available for in-person meetings, virtual mentoring, or both?

☐ In-person ☐ Virtual ☐ Both

Preferred days/times to volunteer:

- ☐ Weekdays
- ☐ Weekends
- ☐ Mornings
- ☐ Afternoons
- ☐ Evenings

3. Do you have any scheduling restrictions we should be aware of?

References

Please provide two references who can speak to your character and qualifications for being a mentor.

- **Reference 1:**

- Name: _____
- Relationship to Applicant: _____
- Phone Number: _____
- Email Address: _____

- **Reference 2:**

- Name: _____
- Relationship to Applicant: _____
- Phone Number: _____
- Email Address: _____

Background Check & Consent

Have you ever been convicted of a felony? ☐ Yes ☐ No

- If yes, please explain:

As part of our commitment to safety, all mentors must undergo a background check. Do you consent to a background check? ☐ Yes ☐ No

By signing below, I certify that all the information provided is true and accurate and that I am committed to fulfilling the responsibilities of a mentor in the Ladies United By Hope Mentoring Program.

Signature: _____ **Date:** _____

Thank you for your interest in mentoring! We will be in touch with the next steps.