



G.L.U.E

Girls Like Us Evolving, Inc.

Alischa Hansford, Executive Director

www.girlslikeusevolving.org

240-583-1959

About Us

Girls Like Us Evolving (G.L.U.E) Mentor Program is a non-profit leadership development program serving girls ages 10-18, in Capitol Heights area.

Girls Like Us Evolving works with girls to provide academic achievement, college and career training, as well as tools for serving their community.

Girls Like Us Evolving believes that young women should be measured not by outward beauty or social status, but by their natural beauty, including their ability to successfully overcome adversity and help others do the same. It is our goal to foster an environment where women and girls expand their understanding of what is possible and create their own opportunities for life success. They are encouraged to become role models to their peers while contributing to the betterment of their community.

1. To inspire women and girls to create their own definition of beauty.
2. To encourage women to expand their understanding of what is possible to achieve.
3. To partner with local businesses, community organizations, and community leaders to promote academic excellence and personal growth in young women through activities such as internships and personal and professional mentoring.

Girls Like US Evolving Inc. offers a custom curriculum that focuses on helping girls build leadership and Life skills like self-reflection, critical thinking, sound decision making, goal setting, financial literacy, educational planning, clear communication and personal accountability. As a result, **G.L.U.E** girls develop a true sense of their personal power and their outcomes are astounding!

Mission and Vision Statement

G.L.U.E is focused on inspiring young women to overcome and thrive through life's challenges by embracing change, encouraging personal development and self-love. Our mission is to help young women of all walks of life evolve in such a way that it's impossible to go back to who they used to be!

G.L.U.E envisions a world in which all girls and young women, regardless of race, ethnicity, income level or social status, are nurtured and empowered to evolve to their fullest potential.

Program Overview

Girls Like Us Evolving addresses the interconnected issues of poverty, teen pregnancy, violence, and lack of educational attainment at their very roots, by working with girls during the critical pre-teen years, when personal choices that are made can have lifelong consequences. **G.L.U.E** girls build leadership skills and character traits such as honesty, personal accountability, learning to listen to the viewpoints of others, clear communication, critical thinking about life and its choices and sound decision making. A typical session features a guided conversation/activity led by one highly trained Adult Program Coordinator. Topics might include school, relationships with family, friends and boys, careers, health or whatever the girls identify as pressing issues for them.

The Girls Like Us Evolving Promise

The girls recite the **Girls Like Us Evolving** Promise at each gathering:

*We are **Girls Like Us Evolving** and we are operating at our best. All of the girls here are my sisters, each one precious and unique. I am phenomenal! My beauty does not come from my outward appearance, or from elaborate hairstyles and the wearing of gold jewelry or fine clothes. Rather, I am phenomenal because of my inner self, the unfading beauty of my gentle and quiet spirit, is of great worth in God's sight. I am phenomenal because I was wonderfully made. I am powerful, and I WILL achieve my goals and dreams. I am a QUEEN, GIRLS LIKE US EVOLVING!*

OUR MENTOR GROUP

G.L.U.E Mentoring (10-18 years of age)

G.L.U.E is a monthly empowerment/mentoring session for young girls ages 10-18. The program is unique from other mentoring programs because it utilizes a group mentoring model. The activities range from workshops and focus groups to social and cultural field trips. The workshops focus on five main areas:

1. Positive Self Identity and Self Esteem
2. Personal Vision and Goals and Moral Character
3. Basic Life skills
4. Social and Emotional Skills
5. Academic Success and Work Ethic

Thank you for your interest in Girls Like Us Evolving, Inc. Mentoring Programs. This mentoring initiative assist in the development of healthy relationship among young girls, to provide the support needed to succeed.

Girls Like Us Evolving, Inc. pairs young girls with adult mentors who meet and works with them every third Saturday. Our mentor's assist in helping the mentees define individual goals and find ways to achieve those goals. Since the expectations of each child will vary, the job of the mentor is to encourage the positive development of the young girls. By sharing fun activities and conversation, a mentor encourages positive choices and promotes high self-esteem. If you are interested in having your young girl be a part of our organization, please complete the attached Mentee Application and return to your point of contact listed below. If you need further assistance please contact, Alischa Hansford, Girls Like Us Evolving Executive Director.

All mentors complete a formal training and undergo a criminal background check before they are allowed to work with the girls.

Alischa Hansford
(240) 583-1959
girlslikeusevolving@gmail.com

Mentee Application

****To be completed by the Parent/Guardian****

Personal Information

Youth's Name: _____ Age: _____

Date of Birth: _____

Address: _____
Street City/State Zip Code

Parent/Guardian Name: _____

Email: _____

Relationship to applicant: Mother () Father () Other () - specify: _____

Home #: (____) _____ Work #: (____) _____ Alternate/Cell #: (____) _____

Number of Siblings: ____ (Male(s) ____ Ages _____) (Female(s) ____ Ages _____)

Ethnicity: () White () Hispanic () African American () _____
Asian () Other: _____

Name of School: _____ Grade: ____ Average GPA or Letter grade: ____

Emergency Contact Information

****In the event that a parent/guardian cannot be reached, please list person(s) to contact in case of an emergency****

Name Relationship to applicant Phone

Name Relationship to applicant Phone:

Name Relationship to applicant Phone

| | | | |
|--|----------------|--------------|------------|
| To be completed by the mentoring organization: | | School-based | Site-based |
| Agency | _____ | Name: | |
| Mentor | _____ | Name: | |
| Date Assigned: | ____/____/____ | | |

Application Questions

(Please answer all of the following questions as completely as possible. If more space is needed, use an extra sheet of paper or write on the back of this page.)

1. Why do you/ does your child want to participate in **Girls Like Us Evolving**?

2. Briefly describe your expectations of **Girls like Us Evolving**.

3. Is your child available to meet with the group monthly? Please explain if there are particular scheduling issues.

4. Describe your child's school performance, including grades, homework, attendance, behavior, etc:

5. Does your child have friends? Please describe her friendships. __

6. Is your child currently having any behavioral or social problems at home or at school? If so, please provide information that may be helpful for us to know as we work with your child.

7. Is your child currently dealing with any traumatic events (i.e. death in the family, abuse, divorce)? If yes, please provide details.

8. Can you provide any additional background information that may be helpful in us meeting your child's need? Please let us know areas you would like for us to focus on with one to one mentoring.

Mentee Interest Survey

****To be Completed by Youth****

This survey will help us know more about the child and her interests and help us find a good match. All mentees/mentors meet monthly and have weekly contact.

Do you speak any languages other than English? If so, which languages?

What are some favorite things you like to do with other people?

What are your favorite subjects in school?

If you could learn about a job/career, what would it be?

What are your favorite subjects to read about?

What is one goal you have set for the future?

If you could learn something new, what would it be?

What person do you most admire and why?

Describe your ideal Saturday.

Please circle all activities you are interested in:

Biking Camping Science Cooking Library Sewing Hiking
Boating Music Sports Yoga Church Golf Swimming Parks Movies
Fishing Animals Reading Board Games Shopping Gardening Acting Singing

List any other areas of special interest:

Mentee Medical History

To be completed by the Parent/Guardian

Name of Primary Care Physician:

Phone No: () _____

Medical Insurance Provider:

Policy Number: _____

Insurance Provider's Phone No. : ()

Does your daughter have any physical problems or limitations?

No **Yes** If yes, please describe them:

Is your daughter currently receiving treatment for any medical condition or other challenges? **No** **Yes** If yes, please explain:

Is she currently on any type of medication?

No **Yes** If yes, please explain:

Does your daughter have any known allergies or adverse reactions to medications?

No **Yes** If yes, please explain:

Are there any other medical challenges or limitations that we need to know about?

No **Yes** If yes, please explain:

Does your daughter have any emotional/mental health issues or problems right now?

No **Yes** If yes, please explain:

Is your daughter currently seeing a counselor or therapist?

No **Yes** If yes, please explain:

Counselor/Therapist's Name: _____ Phone No: (____) _____

Parent/Guardian Signature: _____ Date: _____

Mentee Permission and Release Form

*****To be completed by the Parent/Guardian*****

Girls Like Us Evolving, Inc. appreciates you and your child's interest in her becoming a mentee. This application is intended as a means of informing and gaining the consent of the parent/guardian to allow their daughter to participate in **Girls Like Us Evolving, LLC**. After receiving this completed application form, we will evaluate the information and let you know when your child can start into the mentoring project. Much of the information you supply in this application packet will be used to match your child with an appropriate mentor, Therefore, the mentoring staff may, at times, need to access and share this information with prospective mentors and other parties when it is in the best interest of the match. However, we do not reveal names until there is an initial interest from the mentee, parent/guardian, and mentor based first upon anonymous information provided about each other.

Please initial each of the following:

___ I give my informed consent and permission for my child to participate in the **Girls Like Us Evolving, Inc** and its related activities.

___ I agree to have my child follow all mentoring project guidelines and understand that any violation on my child's part may result in suspension and/or termination of the mentoring relationship.

___ I hereby acknowledge that my child will not be transported by her mentor or by **Girls Like Us Evolving, Inc.** staff or representatives while participating in the program and that such transportation is voluntary and at her own risk.

___ I release the **Girls Like Us Evolving, Inc.** staff or its representatives of all liability of injury, death, or other damage to me, my child, family, estate, or heirs that may result from her participation in the project, including but not limited to transportation, and hold harmless any **Girls Like Us, Inc.** mentor, project staff, or its representatives, both collectively and individually, of any injury, physical or emotional.

___ I agree to allow **Girls Like Us Evolving, Inc.** to use any photographic image or name of my child taken while participating in the mentoring project. These images may be used in promotions or other related marketing materials.

I understand I must return all of the following completed items along with this application, and that any incomplete information will result in the delay of my application being processed:

- **Contact and Information Release Form**
- **Mentee Interest Survey Form**

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

Parent/Guardian Signature

Date

Mentee Contact and Information Release

*****To be completed by the Parent/Guardian*****

Youth's Name: _____ Date of Birth: ____/____/____

School: _____ Grade: _____

I hereby grant permission for **Girls Like Us Evolving, Inc** to make contact with my child and conduct a personal interview for the purpose of applying to be a mentee.

Furthermore, I understand that basic information about my child will be anonymously (without names) shared with a prospective mentor(s) to aid in determining a suitable match. Once a mentor/mentee match is determined, myself, my child's identity, and other relevant information will be shared with the mentor to the extent that it aids in facilitating a successful match.

Parent/Guardian Signature

Date