



CAPITAL GUARDIAN YOUTH CHALLENGE ACADEMY MENTOR APPLICATION



3201 Oak Hill Drive
Laurel, MD 20724
Office (202) 730-1531
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www.cgyca.org



“Embrace the Challenge”

MENTOR APPLICATION PACKET CONTENTS

Website: www.cgyca.org
Email: mentor@cgyca.org

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APPLICANT MENTOR PROSPECT INFORMATION

Dear Parent/Guardian(s),

The Post-Residential Phase of the Capital Guardian Youth Challenge Academy is crucial to the long-term success of Applicants. The goal of the Post-Residential Phase is to ensure Cadets achieve their identified goals and remain free from criminal activity and substance abuse problems. Mentors who are committed to helping the young person they volunteer for and are indispensable to the Post-Residential Phase, and ultimately aid in the long-term success of the Cadet.

Applicants should actively participate in the recruitment of mentors through relationships they have had prior to entering the Challenge Program producing a "Friendly Match Strategy" which eliminates the isolation many Mentees/Mentors may feel when matched with strangers. Each Applicant's application should include at least 1(one) Mentor application to be selected to the academy. Mentors are then screened, trained and matched during the Residential Phase. Appropriate mentors may be found in many places; youth workers, teachers, parent co-workers, coaches, business professionals, community workers, neighbors, retired adults in the community, local churches, Civic Organizations, police officers, firefighters, National Guard members, etc. The Mentor Brainstorm Worksheet is provided for your use and will help your youth find a dependable mentor nominee.

QUALIFICATIONS OF A MENTOR

- **Be at least 21 years old and the same gender/sex as the Applicant.**
- **Live in the same geographical area (usually within 50 miles) of the Applicant.**
- **Must consent to a criminal history background check. This check must be free of any sex crimes and also be free of felonies, alcohol or substance abuse within the last five years.**
- **Must NOT be an immediate family member (including parents, in-laws, significant others of parents, siblings, etc.), nor a current resident of the same address.**
- **Must have a desire to volunteer their time for the youth and the program over the 17 1/2 months of the program.**

EXPECTATION OF MENTORS

- **Complete 4 hours of mentor training to prepare for the role**
- **Participate in at least 1(one) visit and the mentor match ceremony at our Academy during the Residential Phase**
- **Begin building a relationship with the Cadet by writing weekly and providing encouragement during the five (1/2) month Residential Phase**
- **Continue the Mentor-Mentee relationship through visits, mail or email, and telephone during the twelve (12) month Post-Residential Phase**
- **Provide guidance for social development and achievement of the Cadet's goals and objectives after graduation.**
- **Submit a monthly progress report to the Challenge Academy's assigned staff monthly for 12 months beyond the Residential Phase.**

All individuals accepted to be a Mentor MUST ATTEND MENTOR TRAINING. Individuals will receive training in program requirements, guidance in working with at-risk youth, supportive resources, and training in reporting methods before they begin the role of a mentor. Parents/Guardians are encouraged to attend the training sessions so they will have an understanding of the Mentor/Cadet relationship requirements. Mentors will be notified in advance of training sessions. If you have any questions regarding any of the Mentor Application forms, or the mentoring program, feel free to contact us.

Sincerely,

**The Mentor Liaison
(202) 730-1531
mentor@ccgyca.org**

MENTOR APPLICATION PACKET

Data protected by the Privacy Act of 1974

Principal Purpose: To select mentor applicants for participation in the District of Columbia National Guard Capital Guardian Youth Challenge Academy.

Disclosure: The Mentor applicant must submit to a drug test and a background check which includes a criminal history and sex offender violations. The Capital Guardian Youth Challenge Academy pays for the background check. Persons who have a record of felonies within the past five (5) years, and sex offender violations or child abuse violations cannot be considered for participation in the Capital Guardian Youth Challenge Academy as a Mentor.

Disclosure is voluntary, however, applicants who do not provide requested information will not be considered for participation in the program.

Answer all questions completely. Answers given in this application are intended to help us know the mentor applicant better. It is not our purpose to request applicants based solely on answers provided in this application.

**MAIL THIS COMPLETED APPLICATION TO:
Post-Residential Department.: Attn: Mentor Liaison
Capital Guardian Youth Challenge Academy
3201 Oak Hill Drive
Laurel, MD 20724**

**SCAN/FAX TO:
202-730-1532**

**E-MAIL:
mentor@cgyca.org**

The Capital Guardian Youth Challenge Academy is a non-profit organization sponsored by the District of Columbia National Guard. Our purpose is to intervene in the life of at-risk youth by providing the values, skill, education and self-discipline needed to produce responsible, productive citizens, and to do so in a highly disciplined atmosphere. We serve unemployed youth who have withdrawn from high school without regard to race, gender, religion, or national origin.

For information, call the Post-Residential Department (202) 730-1531

Youth's PRINTED Last Name

Youth's PRINTED First Name

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EXPLANATION TO POTENTIAL MENTOR VOLUNTEER

Purpose: Each cadet attending the Academy is paired with an adult mentor - chosen by the cadet - to help advise, guide, and assist them throughout the Residential and Post Residential goal setting process. You may also submit an application to be considered as a mentor for a cadet, who because of their individual circumstances is unable to find a mentor.

Mission Statement: The Mission of the Capital Guardian Youth Challenge Academy (CGYCA) is to intervene in the life of at-risk youth by providing the values, skills, education and self-discipline needed to produce responsible, productive citizens, and to do so in a highly disciplined atmosphere.

Background: CGYCA is part of the National Youth Challenge Program, authorized and funded by the Department of Defense and conducted by the National Guard. The Youth Challenge Program was established in 1993 and there are currently 34 programs in 27 states, Puerto Rico and the District of Columbia (some states have more than one program). The goal of the program is to give dropouts a second chance to complete their high school education. One of the most important things you need to know is that the program is voluntary and a youth are required to apply for admission.

The CGYCA is not like a regular high school and is not easy. It is a 22-week residential program conducted in a military style format that provides the principles, structure, and emphasis on discipline and personal responsibility. The cadet is a member of a training platoon, lives in a dormitory, wears a uniform, meets military grooming standards, observes military customs and courtesies, does lots of marching, and perhaps most importantly he/she is held accountable for their words and actions. The staff is caring, dedicated, trained, and committed to helping the cadet; they understand and appreciate the courage and commitment it took to make the decision to attend the CGYCA. They will do everything they can to help the cadet succeed; however, they will not cut the cadet any slack or go easy on them in terms of meeting our high standards. The staff uses a "hands off" approach that is tough and disciplined, yet caring and respectful, to instruct, train and motivate the cadet. After graduating from the CGYCA, the cadet continues to work with an adult mentor in a positive relationship that supports the cadet in applying the positive values and new skills acquired during the 22-week residential phase. This post-graduation mentoring phase is a major factor in the overall success of the Youth Challenge Program and we devote a significant amount of staff time and attention to supporting the mentoring program. **NOTE:** Each cadet is required to have a mentor to attend the CGYCA and we cannot complete processing the application without having an approved mentor. Mentors must complete their training on the dates and times we provide you.

What is Mentoring? Mentoring is a positive one-on-one relationship between a youth and an adult that provides emotional support, advice, and guidance to help the younger person deal with the challenges of life. The goal is to help the young person gain the skills and confidence to deal with those situations and be able and responsible to make good choices in the future. Examples of challenges and situations where a mentor's advice and guidance could be important, if not critical, include: making education and career choices; seeking, performing, and holding a job; managing personal finances; owning a home or renting an apartment; teen pregnancy and parenting skills; substance abuse; etc. Your role is not to replace a parent or guardian, but to provide additional information and perspectives that might not be available to them.

What's Expected of You As a Mentor For A CGYCA Cadet? If you agree to be a mentor for a specific cadet, or want to be considered for a mentor position with a cadet/applicant, you're making a commitment of time, attention, and some expense. We can't quantify any of these, however, in terms of potential impact you could have on a young person's life the cost is negligible and the rewards are immense.

MENTOR APPLICATION

NAME OF CADET YOU WOULD LIKE TO MENTOR:

Last Name *First Name* *Middle Name*

Mentor Name: _____ **Gender:** _____ **Date of Birth:** _____

_____ _____ _____

_____ *M* *F* _____ _____

Race: **White (Not of Hispanic Origin)** **Black** **Pacific Islander** **Hispanic** **American Indian / Alaskan Native**

 Asian **Other / Multi-Racial** **Marital Status:** **Married** **Divorced** **Single** **Widowed**

Your Current Residence: _____

_____ **Home Phone:** _____

Street _____

_____ **Cell Phone:** _____

City, State, Zip Code _____

_____ **Email Address** *Ward* _____

How long lived at current residence? _____

What other states have you lived in during the last five years? _____

Are you related to this youth? _____ **If yes, how?** _____

_____ *Yes* *No*

Do you speak more than one language? _____ **If yes, what language?** _____

_____ *Yes* *No*

High School Graduate: _____ **Year:** _____ **GED:** _____ **Year:** _____

_____ *Yes* *No* _____ *Yes* *No*

College/ Univ. or Tech: _____ **Years Attended:** _____ **Degree:** _____

Do you have a valid driver's license? _____ **Do you have your own transportation?:** _____

_____ *Yes* *No* _____ *Yes* *No*

Employer Name: _____ **Employer Phone Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Job Title: _____ **Employment Status:** _____

_____ *Full Time* *Part Time* *Temporary* *Unemployed* *Retired*

Date of Employment: _____ **Signature** _____

_____ / _____ / _____

to _____ / _____ / _____

_____ *This information is true and accurate to the best of my knowledge.* _____ *Date:* _____

MENTOR AUTHORIZATION TO RELEASE INFORMATION

I, _____ hereby authorize the Capital Guardian Youth Challenge Academy, along with the law enforcement departments, to conduct whatever background search that may be deemed appropriate.

First Name

Middle Name

Last Name

The information and background search is necessary to assist in determining my qualifications and suitability for the Volunteer Mentor Position I am seeking with the Capital Guardian Youth Challenge Academy.

I fully understand that the information collected may be of a sensitive, confidential, and privileged nature, and may reflect upon my suitability for this position. I hereby release the District of Columbia National Guard, and the Capital Guardian Youth Challenge Academy and its agents from liability and damage that may result from the exchange of requested information between law enforcement departments and the Capital Guardian Youth Challenge Academy.

Signature: _____

Date: _____

MENTOR CONFIDENTIALITY AGREEMENT

While serving as a mentor for a student in the Capital Guardian Youth Challenge Academy, you may gain information that may be considered personal and/or confidential and should be treated accordingly. Besides breaching the trust that is the foundation of your mentoring relationship, and improper disclosure to an unauthorized third party could constitute a violation of District of Columbia law and make you subject to legal action. All records dealing with your mentee must be treated as confidential. I understand my duty as a mentor is to abide by the laws of the District of Columbia and the laws and policies governing the preservation of confidential information.

Mentor's Signature: _____

Date: _____

Printed Name: _____

MENTOR LIABILITY RELEASE

PURPOSE: This form advises you that you are agreeing to hold the District of Columbia, District of Columbia National Guard and the Capital Guardian Youth Challenge Academy harmless for injuries, damages and/or losses you incur as a result of volunteering to become a mentor and participating in mentoring activities. It also explains that as a mentor you are not considered an agent, employee or representative of the Capital Guardian Youth Challenge Academy and therefore not covered under any state/agency insurance or Labor and Industries disabilities coverage for any expenses, injuries damages, or losses you incur as the result.

Volunteer Mentor Activities. I understand and agree that while volunteering as a mentor I will be engaging in school-based and community-based mentoring activities with my Mentee. I understand that these activities may include a variety of interactions between my mentee and myself to include; letter writing/email correspondence, telephone calls and day visits on and off the Capital Guardian Youth Challenge Academy campus during the residential phase. These Activities may have inherent risks such as physical activities, community service projects or recreational activities. I recognize that I must exercise care in supervising my mentee during the residential and post-residential phase of the mentoring relationship; including planning and selecting the type of activities we participate in during our visits together. Further, I understand that the goal of mentoring is to develop a positive adult/youth relationship. I agree that I am responsible for choosing and conducting all activities with my mentee, and I agree that such activities will be legal and focus on trust and relationship building, open communication, mentee social skill building, and other related activities will be conducted in the State of Maryland or the District of Columbia during the residential Phase.

Volunteer Mentor Status. I also understand and agree I am not an agent, employee or representative of the District of Columbia, District of Columbia National Guard and The Capital Guardian Youth Challenge Academy in my capacity as a mentor, nor will I claim to be such a representative, officer or employee of the CGYCA. I will not make any claim of right, privilege or benefit that would accrue to such an employee. I do not expect to receive any monetary wages for services rendered during the mentoring period and understand as a volunteer I am not covered for any injury, damage or loss suffered while acting in the capacity as a mentor. I understand that if I use my private motor vehicle in the course of my volunteer mentor duties, it is my obligation to obtain and maintain state required liability insurance to cover any accidents involving my vehicle and to maintain the appropriate legally required vehicle operator's license. I further understand that it is my responsibility to obtain and maintain insurance policies for damage, loss or liability on all personally owned, lease or rented equipment I use while performing as a volunteer mentor. The Capital Guardian Youth Challenge Academy, District of Columbia National Guard and the District of Columbia will not provide any liability or other insurance coverage.

Hold Harmless. The Mentor will hold harmless the Capital Guardian Youth Challenge Academy, District of Columbia National Guard, and the District of Columbia, and its employees while performing his/her mentoring activity, from any and all costs, claims, judgments, and/or awards of damages (both to persons and/or property), which may accrue to or be suffered by any person(s), or property, arising out of mentoring activities.

The Mentor agrees to and hereby does waive any and all claims for personal injury and damages or losses to property, including expenses or lost revenues, in connection with mentoring activities.

In any case any claim, suit or action is brought against the Capital Guardian Youth Challenge Academy, District of Columbia National Guard and the District of Columbia and its employees, arising out of the mentoring activity, the mentor shall, upon notice of such claim, suit or action, defend the same at his/her sole expense and satisfy and judgment and/or award of damages.

This indemnification and waiver shall survive the termination of the release.

Mentor's Signature _____

Date: _____

Printed Name: _____

MENTORING / CADET AGREEMENT

PURPOSE: This document must be signed in the presence of a legal guardian of the youth and the youth applicant, and the primary mentor applicant. This agreement provides the essence of why you and your youth will enter into this mentoring relationship. As a volunteer mentor, you should know that your application and eventual training does not guarantee your youth will be accepted into the program, or will complete the program if they are accepted. Entering the mentor screening process through application and training will nonetheless send a very strong message to the youth that you care about their future and their success. Official mentoring will start from the “match” as designated by the academy only. If a student fails to complete the program, official mentoring will cease, but friendships cannot be mandated or managed. The parents/guardian, youth, and mentor will decide in such circumstances the degree of the adult volunteer’s involvement.

The Capital Guardian Youth ChalleNGe Mentor and Cadet agree to the following:

- **Commit to maintaining weekly contact through letter writing, phone, email, or any other form of communication permitted by the academy until finished with 17 1/2 month program**
- **Spend time together in person at least four (4) hours per month during the Post Residential Phase when the cadet returns to his/her community.**
- **Work together on the development and revisions of the Cadet’s Post Residential Action Plan (P-RAP)**
- **Notify each other in advance, if it is impossible to keep an appointment.**
- **Do our best to get to know, trust, respect, and communicate with each other.**
- **Assist the cadet with the transition from the Residential to the Post-Residential phase.**
- **Allow the CGYCA staff to mediate if the match has to end early for any reason.**
- **Update the CGYCA staff monthly, and at the end of our 17 1/2 month agreement, decide our plans, and celebrate our time together.**

We understand these terms of the Mentoring Agreement and will abide by them.

Mentor Signature

Cadet Signature

Mentor Printed Name

Cadet Printed Name

Parent/Legal Guardian Signature

Parent/Legal Guardian Printed Name

PERSONAL REFERENCE - 1

PURPOSE: This form is to be completed by the mentor's references. You need two of these written references and they should be submitted concurrently with your application.

Mentor's Name

Cadet's Name

Has applied to be a mentor for a student attending the Capital Guardian Youth Challenge Academy. In processing this application, it's important that we have additional insight into his/her character, emotional stability, etc. Please answer these questions carefully and thoughtfully. Your answers will be kept confidence. If you have questions, call us at 202-870-9111

How long have you known the applicant? _____ **Years** _____ **Months**

What is your relationship to the applicant? _____

As far as you know, does the applicant have a good home environment? Yes _____ No _____

Does the applicant work well with others? Yes _____ No _____

Does the applicant have a tendency to over-commit/get involved in too many things? Yes _____ No _____

Please rate the applicant in the following areas:

	Excellent	Good	Average	Poor	Unknown
Character	_____	_____	_____	_____	_____
Morals	_____	_____	_____	_____	_____
Compassion	_____	_____	_____	_____	_____
Completes commitments	_____	_____	_____	_____	_____
Emotional stability	_____	_____	_____	_____	_____
Reachable (returns calls, emails, etc.)	_____	_____	_____	_____	_____

Would you recommend the applicant as a good choice to work with a teens? Yes _____ No _____

Would you want the applicant to mentor your child (or niece, nephew, etc.)? Yes _____ No _____

Reference's Signature

Reference's Printed Name:

Date: _____ / _____ / _____

Address: _____

Phone Number: _____ - _____ - _____

You can either return this form to the applicant or send it to the CGYCA Post Residential Unit, 3201 Oak Hill Drive Laurel, MD 20724 or it can be scanned and emailed to mentor@cgycya.org

PERSONAL REFERENCE - 2

PURPOSE: This form is to be completed by the mentor's references. You need two of these written references and they should be submitted concurrently with your application.

Mentor's Name

Cadet's Name

Has applied to be a mentor for a student attending the Capital Guardian Youth Challenge Academy. In processing this application, it's important that we have additional insight into his/her character, emotional stability, etc. Please answer these questions carefully and thoughtfully. Your answers will be kept confidence. If you have questions, call us at 202-870-9111

How long have you known the applicant? _____ **Years** _____ **Months**

What is your relationship to the applicant? _____

As far as you know, does the applicant have a good home environment? Yes _____ No _____

Does the applicant work well with others? Yes _____ No _____

Does the applicant have a tendency to over-commit/get involved in too many things? Yes _____ No _____

Please rate the applicant in the following areas:

Excellent Good Average Poor Unknown

Character _____

Morals _____

Compassion _____

Completes commitments _____

Emotional stability _____

Reachable (returns calls, emails, etc.) _____

Would you recommend the applicant as a good choice to work with a teens? Yes _____ No _____

Would you want the applicant to mentor your child (or niece, nephew, etc.)? Yes _____ No _____

Reference's Signature

Reference's Printed Name:

Date: / / _____

Address: _____

Phone Number: - - _____

You can either return this form to the applicant or send it to the CGYCA Post Residential Unit, 3201 Oak Hill Drive Laurel, MD 20724 or it can be scanned and emailed to mentor@cgycya.org