



Mentorship Program Registration

Thank you for your interest in becoming a mentor with **Branches for the Lake**! Please complete the form below to help us match you with the right students.

Personal Information:

Full Name: _____

Address: _____

Phone Number: _____ Email Address: _____

Background & Qualifications

Briefly describe your educational background and any relevant experience in tutoring or mentorship:

Attach Resume (if applicable): Yes No OR email it to Branches4tl@gmail.com

Do you hold any certifications or special training related to education or mentoring?

Yes No (If yes, please specify:)

Subjects You Are Interested in Tutoring (Check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Reading & Literacy | <input type="checkbox"/> Personal Finance |
| <input type="checkbox"/> Math | <input type="checkbox"/> Life Skills (Scholarship guidance, resume building, etc.) |
| <input type="checkbox"/> Science | <input type="checkbox"/> Service Industry |
| <input type="checkbox"/> Social Studies/Government | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Foreign Language | |

Availability & Compensation

Hours Available: Mornings Afternoons Evenings Weekdays Weekends _____

Rate for Services expected (if applicable): \$ _____ per hour

I am willing to donate my time to help.

Background Check & Agreement

As part of our mentorship program, a **background check is required** to ensure a safe and professional learning environment.

I am willing to undergo a background check.

By signing below, I certify that all the information provided is accurate to the best of my knowledge.

Signature: _____ Date: _____