



# *My Sister's Keeper* MENTOR APPLICATION

Complete & Submit with your annual mentor donation in the amount of \$100 made payable to:  
My Sister's Keeper P.O. Box 3936 Highland Park, MI 48203 or [www.paypal.me/mysisterskeeper](http://www.paypal.me/mysisterskeeper)

Full

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Driver's License# \_\_\_\_\_ Auto Insurance \_\_\_\_\_

Organization \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Employer Address \_\_\_\_\_

Educational Background/School \_\_\_\_\_

Referred by \_\_\_\_\_

What is your motivation for becoming a mentor with My Sister's Keeper?

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Do you have any personal or professional experience working with youth? Yes/No If so, give details.

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Do you possess any special skills, talents, abilities, or resources which you would like to contribute? Yes/No If so, please list:

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In what area(s) of the organization would you like to serve? Or what do you anticipate will be the extent of your involvement?

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I \_\_\_\_\_, agree to serve as a mentor for a period of 12 months and commit to a minimum of 4 hours per month one-to-one time with my designated mentee. I will fully and actively support the mission, core values, objectives, and organizational goals of My Sister's Keeper. I will follow mentoring best practices as outlined by the nationally recognized organization, MENTOR. I consent to Michigan Central Registry clearance and background checks as needed to protect the interest of My Sister's Keeper participants and stakeholders. I indemnify and hold My Sister's Keeper, its administrators, board, staff, mentors, volunteers, agents, and partners harmless and NOT responsible or liable for any accident, incident, injury or loss resulting from my participation. I waive my right to seek legal action or any form of recourse against My Sister's Keeper or its affiliates. As a MSK mentor and advocate for young women, I vow to aid in the fight to "KEEP" our little sisters on the path to success.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date