



**Please write a response to each of the following questions.**

*(Attach additional sheets if needed)*

1. Why are you interested in becoming an Academic Mentor?
2. For this program you will be required to work a minimum of 10 hours per week, attend group orientations and attend bi-monthly training sessions throughout the semester. Given these responsibilities, how do you feel you will be able to balance your work and school obligations?
3. List activities and organizations you have been involved in, both on and off campus (community service, academic, special interest groups, etc.)
4. Describe skills and/or life experiences you have had that would help you as an Academic Mentor.
5. What youth group would you prefer to work with? (Infants, preschoolers, elementary school children, middle school, high school) Why?
6. What type of setting would you prefer to work? (group, one-on-one, classroom, after school program or community organization).

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**References:** List two references who can provide information about your past employment or community experience. If you are currently a K-State student, you **MUST** list a K-State faculty or staff member as one reference. If you are a new or transfer student, one reference **MUST** be from a faculty member from your respective high school, community college, or other university. We ask that you do not use personal references such as relatives or close personal friends.

**Faculty Reference (see above)**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

**Professional Reference 2 (see above)**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

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• Please read the following and initial •

**MENTOR NOTICE PURSUANT TO THE PROTECT ACT**

To the Mentors applicant:

On April 30, 2003, the Prosecutorial Remedies and Other Tools to end the Exploitation of Children Today (PROTECT) Act of 2003, Public Law 108-21, was signed into law. Section 108 of the PROTECT Act authorizes fingerprint-based state and national criminal history background checks to determine the fitness of persons associated with the Boys & Girls Clubs of America, the National Mentoring Partnership, or the National Council of Youth Sports. On January 5, 2006, the pilot program was extended until August 2008, and was expanded to include any non-profit organization that provides care to children.

Pursuant to the PROTECT Act, the organization to which you have applied to serve as a mentor may request a criminal history background check. This check will access criminal history record information held by the Federal Bureau of Investigation (FBI), and a determination will be rendered by the National Center for Missing and Exploited Children (NCMEC) as to the fitness to serve in that capacity. The determination rendered by NCMEC will be communicated to the

Kansas Highway Patrol. The Kansas Bureau of Investigation and the Kansas Highway Patrol also will conduct criminal history background checks to determine your fitness to serve as a mentor, under the provisions of the National Child Protection Act (NCPA) and the Volunteers for Children Act (VCA). Prior to and after the completion of the background checks, the organization may choose to deny you access to children participating in its program.

Consistent with the provisions of the PROTECT Act, the NCMEC – jointly with the Boys & Girls Clubs of America, the National Mentoring Partnership, and the National Council of Youth Sports – established criteria that NCMEC will use in examining criminal histories and making fitness determinations. The four organizations determined that convictions for the six following crimes will prompt a determination that you “do not meet the criteria” to serve as a volunteer:

- Any felony
- Any lesser crime in which sexual relations is an element (including pornography)
- Any lesser crime involving controlled substances (including DUIs involving drugs)
- Any lesser crime involving force or threat of force against a person
- Any lesser crime involving cruelty to animals
- Any lesser crime against a minor

In addition, in any circumstance in which you have been arrested for a prohibiting offense, but the criminal history record does not indicate a disposition, or you have been arrested and subsequently cleared of one or more crimes against a child, the volunteer organization will be informed that you “may not meet the criteria” to serve as a mentor.

Lastly, in any circumstance in which no record is found, the Kansas Highway Patrol will be informed that you “meet the criteria” to serve as a mentor. Of course, the fitness determination is only one part of the organization’s applicant review, and the absence of a criminal history record does not ensure you will be considered acceptable by the organization.

Under the PROTECT Act, you must provide the volunteer organization with:

1. A set of fingerprints;
2. Your name, address, and date of birth (as it appears on a document made or issued by or under the authority of the United States Government, a state, political subdivision of a State, a foreign government, a political subdivision of foreign government, an international government, or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. 1028(d)(2));
3. A photocopy of the document described in paragraph 2; and
4. A statement of whether you have a criminal record and, if so, the particulars of such record. The attached application may serve as your statement of whether you have a criminal record and your acknowledgement that fingerprint-based records checks will be conducted.

Once the criminal background check is complete, you are entitled to: (1) obtain a copy of any criminal history record; and (2) challenge the accuracy and completeness of the criminal history record information. You may contact the Kansas Highway Patrol to challenge your criminal history information and/or fitness determination.

By signing the mentor application, you authorize: (1) the Kansas Highway Patrol (KHP) to obtain a complete set of your fingerprints and descriptive data and transmit them to the Kansas Bureau of Investigation (KBI) and the Federal Bureau of Investigation (FBI); (2) the KHP, KBI, and FBI to perform criminal history background checks; (3) the FBI to provide the National Center for Missing and Exploited Children (NCMEC) with the results of the check; (4) the NCMEC to inform the KHP of the results of the fitness determination; (5) the KHP to inform the volunteer organization of the results of the fitness determination; and (6) the volunteer organization to inform you of your fitness determination.

\_\_\_\_\_  
Applicant Initials

# MENTOR APPLICATION PURSUANT TO THE PROTECT ACT

## Organization Information

Volunteer Organization: K-State Volunteer Center of Manhattan (KS)  
Address: 2323 Anderson Avenue, Suite 125, KSU Foundation Center,  
Manhattan, KS 66502

Contact Person: Lynda Bachelor, Project Coordinator  
E-Mail: [bachelor@k-state.edu](mailto:bachelor@k-state.edu)

## Applicant Information

Name of the applicant:

\_\_\_\_\_  
First Middle Maiden Last

Other names by which known: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_  
Street address Apt. #

\_\_\_\_\_  
City State Zip Code

**Please check the appropriate box and, if necessary, fill in the requested information:**

I have a criminal record, and the following are the particulars (offense, date, location/jurisdiction, circumstance and outcome) of such record: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I do not have a criminal record.

By signing this form, I acknowledge that I have been provided a copy of this mentor notice and application. My signature constitutes an acknowledgement that criminal history checks will be conducted by the Federal Bureau of Investigation, the Kansas Bureau of Investigation, and the Kansas Highway Patrol. I have read and understood the foregoing, and my certification is true and correct to the best of my knowledge and belief. I swear and affirm that the fingerprints submitted in support of this application are mine.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**K-State Volunteer Center of Manhattan  
Academic Mentoring Availability Schedule**

Please complete this form with your availability for the upcoming semester. This is important as your availability will be a factor in matching you with a compatible placement site. Place an X in each time frame that you WILL be available to mentor *each week*. This includes time for a weekly planning session.

**Name:** \_\_\_\_\_

**Federal Work-Study Eligible?** Y or N

**Number of Hours Desired per week:** \_\_\_\_\_  
(Minimum of 10 hours)

Time	Monday	Tuesday	Wednesday	Thursday	Friday
<b>AM</b>					
7:00 – 7:30					
7:30 – 8					
8:00 – 8:30					
8:30 – 9					
9:00 – 9:30					
9:30 – 10					
10:00 – 10:30					
10:30 – 11					
11:00 – 11:30					
11:30 – 12					
<b>PM</b>					
12:00 – 12:30					
12:30 – 1					
1:00 – 1:30					
1:30 – 2					
2:00 – 2:30					
2:30 – 3					
3:00 – 3:30					
3:30 – 4					
4:00 – 4:30					
4:30 – 5					
5:00 – 5:30					
5:30 – 6					
6:00 – 6:30					
6:30 – 7					
7:00 – 7:30					

Office Use

Federal Work-study amount available:

Number of hours eligible to work:

Site: \_\_\_\_\_ Time \_\_\_\_\_ Day(s) \_\_\_\_\_