

Mentor Information

Contact Information					
Full Name:	-				
	Last	First		M.I.	
Address:					
	Street Address			Unit #	
	City		State	ZIP Code	
Home Phone:		Cell Phone:			
Email					
Birth Date:	Family Situation:				
Spouse's Name:					
	Interests	and Hobbies			
Occupation:					
Places lived/travelled:					
Languages spoken:					
Interests/Hobbies:					
Volunteer Opportunities					
Able to help with the following (please check):					
 □ English language practice □ Driver's license practice □ Other: 		oring ng/Homework	□ Transport □ Computer		

Mentor Information pg. 1 updated 7/3/18

Getting to Kno	ow You	
Is there a particular people group, culture, or lar learning about? Why?	guage that you are most interested in	
What type of New American neighbors are you	most interested in working with?	
• Family • Children • Young adult • E	Iderly • Couple • No preference	
Signature for Driver's	License Check	
By signing below, I,	cords database to check my driving whether I may or may not drive for	
 Volunteers who operate a motor vehicle for their volunteer experience must present and maintain proof of insurance, a valid driver's license and an acceptable driving record as determined by Bismarck Global Neighbors. 		
 Guidelines: No alcohol or drug-related driving v U.S. driver's license; Have no more than one s no other moving violations in the last three yea required by law. 	peeding violation in the last three years; Have	
Checks may occur at random times throughout	my volunteering.	
Volunteer Signature	 Date	

Your mentor application will be complete once you have completed the online background check on our website and we have received its results.

Please send completed applications to:

Bismarck Global Neighbors 418 N. 2nd Street Bismarck, ND 58501

bismarckglobalneighbors@gmail.com



Mentor Information pg. 1 updated 7/3/18