



Dream. Believe. Achieve.

HAWAII NATIONAL GUARD
YOUTH CHALLENGE ACADEMY

P.O. BOX 5210

HILO, HI 96720

(808) 369-0955/ FAX (808) 933-1403

CELL: (808) 896-8228



MENTOR APPLICATION PACKET

Aloha Mentor Prospect,

Thank you for considering to be a mentor for a Hawaii National Guard Youth Challenge Academy applicant. Your involvement during this life changing journey will play a significant part of their future. The mentoring commitment is 14 months long and starts after the Mentor Match Ceremony (see list of events below).

To be eligible for graduation from our academy, each student is **REQUIRED** to have a trained mentor. Please ensure you meet the following criteria:

- Be at least 23 years old.
- Be the same gender as the student.
- Clear of criminal felony convictions, alcohol or substance abuse & DUI's within the past 5 years.
- NOT living in the same household, however must live within reasonable geographic proximity from cadet.
- NOT be an immediate family member (mother, father, step-parents, siblings, step/half siblings, foster parent, legal guardian, ChalleNGe staff member, their spouses or significant other).

After the completed application is received and screened, the following event will take place:

1. You will be contacted for a telephone interview
2. Scheduled for the Mandatory Training Workshop
3. Invited to the Mentor Match Ceremony
4. Contact your student (cadet) weekly

For more information, please contact the Mentor Coordinator's office at (808)369-0955/54, or email at:

stacy.j.atiz@hawaii.gov



APPLICANT YOU WILL MENTOR: _____			
YOUR RELATIONSHIP TO THE STUDENT APPLICANT: _____			
LAST NAME:		FIRST NAME:	
GENDER:	MALE / FEMALE	MARITAL STATUS:	MARRIED/ SINGLE
BIRTHDATE:		AGE:	
PHYSICAL ADDRESS:		MAILING ADDRESS:	
CITY/ STATE		CITY/ STATE	
ZIP CODE		ZIP CODE	
EMAIL			
HOME PHONE ()	BEST TIME TO CALL:		
CELL PHONE ()	BEST TIME TO CALL:		
EMPLOYER		PHONE ()	
OCCUPATION		FULL TIME/ PART TIME	
AUTO INSURANCE	YES NO	NAME OF COMPANY	
SPECIAL INTERESTS			

Are you the parent of a HINGYCA current applicant ?	YES NO	If yes, who:
Are you the parent of a HINGYCA graduate ?	YES NO	If yes, who:
		Class: _____

Have you ever been a mentor for HINGYCA?	YES NO	If yes, who:
		Class: _____
		When were you trained:

References:

Name:		Relationship:	
Cell Phone:		Home Phone:	

Name:		Relationship:	
Cell Phone:		Home Phone:	

Signature: _____ Date: _____

**MENTOR PROGRAM EXPLANATION &
Statement of Understanding**

The Hawaii National Guard Youth Challenge Academy (HINGYCA) is a great opportunity for the youth of Hawaii ages 16-18 who are struggling in school or who have already dropped out. It is truly a “second chance” to turn their lives around. The mentoring program is a very important part of this second chance. When a teen (cadet) has a mentor, who is committed to help him/her succeed, he or she is much more likely to finish the program and return to his/ her community as a productive citizen. We all know that time is precious, however this opportunity will be *life changing*...for the both of you.

Here is a brief description of what is involved in the MENTOR PROGRAM:

- Each applicant (student) must provide at least one COMPLETED Mentor Prospect Application.
- Prospective Mentors are screened and interviewed by the HINGYCA staff.
- Selected Mentors will receive instructions to complete the MANDATORY mentor training.
- Trained Mentors are invited to attend the Mentor Match Ceremony.
 - Matched Mentors will be committed to the 14-month mentoring period. The formal mentoring relationship begins during the 14th week of the residential phase of the program.
 - Matched Mentors are required to make weekly contact (days and times will be discussed at the Mentor Match Event).
 - Matched Mentors will be able to visit onsite (days and times will be discussed at the Mentor Match Event).
 - Matched Mentors assist with the development of the Post Residential Action Plan (PRAP).
 - Matched Mentors are invited to attend activities at HINGYCA through the Mentor Department; including FAMILY DAY and GRADUATION.
- During the POST RESIDENTIAL PHASE (from the day of graduation), mentors and graduates are required to continue weekly contacts (at least two will need to be face to face).
 - Mentors are asked to submit monthly reports with regards to graduate placement success. You will be advised during your training session of the methods of reporting as well as the deadlines that need to be met.
 - The PRAP will be utilized in this phase as a guide for success.

I HAVE READ THE ABOVE DESCRIPTION OF THE HAWAII NATIONAL GUARD YOUTH CHALLENGE MENTORING PROGRAM. I AM AWARE OF AND AGREE TO WHAT IS REQUIRED OF ME AS A MENTOR.

Print: _____

Signature: _____

Date: _____

MENTOR LIABILITY RELEASE

I understand and agree that I will be the one spending time with my matched cadet and that I must exercise care in supervising my cadet while we are together, I also understand and agree that I am not a Youth Challenge Academy agent, and that I am responsible for choosing and conducting all activities with my cadet. Youth Challenge Academy will not control how these activities are conducted, except to ensure that they are done in the interest of the mentoring relationship.

I therefore agree that Youth Challenge Academy will not be liable for, and agree to hold Youth Challenge Academy harmless from and all liability, causes of action and losses imposed on it in any way relating to or arising out of this mentoring agreement.

I further release Youth Challenge Academy from all liability, claims, demands, or actions whatsoever arising out of any damage, loss or injury I might incur while participating in any of the activities contemplated by this mentoring agreement.

CONFIDENTIALITY AGREEMENT

Confidentiality is the preservation of the privileged information concerning the cadet. Most of the information that you gain about the cadet is CONFIDENTIAL; in terms of the law, disclosure could make you legally liable, or the disclosure may violate the trust that the cadet has developed with you, causing damage to your mentoring relationship. ALL record dealing with cadets must be treated as CONFIDENTIAL.

MENTOR AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize and consent to release of information and records bearing on my personal history, arrests, and convictions, in any way to the Youth Challenge Academy. This information will be used for determining my eligibility as a MENTOR with the Hawaii National Guard Youth Challenge Academy. I fully understand that the information collected may be sensitive, and will remain confidential. I hereby release the Hawaii National Guard Youth Challenge Academy and its agents from and liability and damage that may result for the exchange of requested information between law enforcement departments and the Hawaii National Guard Youth Challenge Academy.

FULL NAME			
ANY OTHER NAMES USED			
SOCIAL SECURITY NUMBER		ETHNIC GROUP	
DATE OF BIRTH		GENDER: M / F	

STATE YOU CLAIM RESIDENCY: _____ FROM: _____ TO _____

LIST ANY OTHER STATES YOU LIVED IN:

- 1. _____ FROM: _____ TO _____
- 2. _____ FROM: _____ TO _____

Print: _____

Signature: _____

Date: _____

