



**HAWAII NATIONAL GUARD
YOUTH CHALLENGE ACADEMY**
P. O. Box 75348
Kapolei, Hawaii 96707
(808) 369-3014 * Fax (808) 447-3361



MENTOR REFERENCE RESPONSE

Your immediate response is greatly appreciated!

Dear _____,
(Reference First and Last Name)

_____ has been nominated or volunteered as a mentor with the Youth
(Mentor Prospect First and Last Name)
CHALLENGE Academy for Applicant _____. He/she is being considered for
(Applicant First and Last Name, if known)

a match with an at-risk youth in a one-to-one relationship. This mentor prospect listed you as a character reference. Please answer the questions on this form as fully and carefully as you can. Information received will be kept confidential.

How long have you known the mentor prospect? _____ Relationship: _____

Does the mentor prospect have a good home relationship? _____

Does he/she work well with others? _____

Does he/she tend to overcommit him/herself? Get too involved? _____

How would you rate him/her based on the following?

| | Excellent | Good | Average | Poor | Unknown |
|---------------------------------|-----------|-------|---------|-------|---------|
| Personal habits | _____ | _____ | _____ | _____ | _____ |
| Character | _____ | _____ | _____ | _____ | _____ |
| Morals | _____ | _____ | _____ | _____ | _____ |
| Compassion for those in need | _____ | _____ | _____ | _____ | _____ |
| Completes commitments | _____ | _____ | _____ | _____ | _____ |
| Emotional stability | _____ | _____ | _____ | _____ | _____ |
| Receives constructive criticism | _____ | _____ | _____ | _____ | _____ |
| Health | _____ | _____ | _____ | _____ | _____ |

Do you recommend this person as a mentor for a youth at-risk? Why? (Explain)

Signature: _____ Date: _____

Home Phone: _____ Work Phone: _____

For more information, please call Mentor Coordinators Office @ (808) 369-3014 or email: tezrah.m.s.duldulao@hawaii.gov