

YOUTH GUIDANCE BUSINESS MENTORING HOST APPLICATION

Thank you for your interest in becoming a Youth Guidance Business Mentor. We have embarked on this project to provide hands-on workplace experience for the many 15-18 year old teens in our program. When mentors come to us for a mentee, teens are often overlooked in favor of a younger child. This Business Mentoring program will enable us to provide not only much needed positive adult role models for our at-risk teens but also real workplace experience for them. This experience will help our teens build their resumes and prepare them for the workplace in the future.

Thank you again for investing in the future of an IRC teen in need!

I _____, agree to provide a Business Mentoring relationship for ____ teens
(Decision Maker's Name) (#)
participating in the Youth Guidance Mentoring & Activities Program at _____.
(Business)

As a host site, I agree to adhere to all requirements of the YG Business Mentoring Program, which are listed below:

YG Business Mentoring Program Requirements

- 1) Provide an afterschool hands-on experience for at least one teen (15-18) in Youth Guidance for at least 4 months.
- 2) Provide proper training and supervision of the youth upon placement with your business.
- 3) Engage the youth in meaningful tasks for at least 3-6 hours per week.
- 4) Communicate and report to the YG Mentor Coordinator as required. (The Mentor Coordinator will be calling weekly for the first month, then monthly thereafter).
- 5) Communicate clearly and concisely with the youth member. Do not make false promises nor lead the youth to believe in opportunities that are not going to happen.
- 6) ALWAYS keep YG staff informed of any changes and/or issues the relationship is experiencing.
- 7) Be patient with the youth, as this is for most, their first experience in the workforce.
- 8) Attend a brief Business Mentoring Host Orientation.

Date Printed Name Signature

We will acknowledge receipt of your application within 24 hours. We will then contact you when we have a teen prepared for placement at your business. Program start date is scheduled for February 1, 2010.



Please complete and return both pages to Allison Peeler at
apeeler@ircgov.com
or via fax: 770-5042 Attn: Allison.

Business Mentoring Host Application (page 2)

Name of Company: _____

Company Location: _____

Mailing Address (if different): _____

Fax #: _____

Mentor/Supervisor: _____

Mentor/Supervisor's Phone #: _____

Mentor/Supervisor's Email: _____

Desired Mentee Start Date: _____

Types of Tasks Mentee Will Be Performing:

Answering Phones

Computer Work: Word, Excel, etc

Filing

Research (Internet)

Speaking to Clients

Other: _____

Prepping Food

What skills and interests would you like to have in your Business Mentee?:

Are you able to provide on-the-job training?

Desired hours per week? _____

Have you ever had an intern at your business? Yes No

If yes, please describe your experience. How was it successful? If there were any complications, please share:

Has your business or Mentor/Supervisor ever supervised teens? If yes, please describe the environment and level of supervision that took place.

Why are you interested in participating in the YG Business Mentoring program?

What do you hope to get out of this Business Mentoring experience?