

**California Mentoring Initiative
for
Youth with Disabilities**

**Policy, Procedure and
Training Manual**



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About the CMI Policy and Procedure Manual

The California Mentoring Initiative Policy and Procedure Manual addresses the project's purpose, rules, and procedures. Although the manual was originally designed for a research-based mentoring model, it can be adapted for use in other settings. The content can be customized to reflect the nature of a particular mentoring program. Therefore, it can serve as a blueprint for program development or a tool in the examination of a current program's structure. The manual represents the original intent of the project; slight modifications were made to the mentor model after data collection was completed for the pilot study. The final report, highlighting the project's findings and recommendations, accompanies the manual. The report may also contain useful information for those interested in embarking on or fine-tuning a mentoring program.

Organizational Policy & Procedure

Organizational Statement & Partner Information

The California Mentoring Initiative for Youth with Disabilities (CMI) is an exciting five (5)-year research-based project designed to develop the competence and potential of youth with disabilities. Working in collaboration with San Diego State University's (SDSU) Interwork Institute and the California Department of Rehabilitation (DOR), CMI intends to establish a mentoring model that will increase community integration, postsecondary education and employment for transition age youth/young adults participating in the vocational rehabilitation system.

There are two research areas in the state participating in this program, one in Los Angeles/Orange County and the other in Santa Clara County. TransAccess/East Side Union High School District serves as the local representative responsible for the recruitment, screening, selection and supervision of the mentor program in Santa Clara County. In Los Angeles/Orange County, the local representatives are Whittier Union High School District's Career Connection and, its partner, Irvine Unified School District's Career Link. Each program will work with their respective constituents in recruiting, matching, and managing the mentor program; SDSU will compile the data and analyze the outcomes for both Northern and Southern California CMI partners.

CMI Partners

California Department of Rehabilitation (DOR)

DOR will play an integral role in the mentoring project. DOR's mission is to work in partnership with consumers to provide services and advocacy resulting in employment, independent living and equality for individuals with disabilities. They will identify and refer in-plan potential youth/young adult mentees in transition and will collaborate with community partners. DOR will provide support services to the mentees and meet necessary transportation and accommodation needs. Additionally, DOR will review final results from the mentoring project to determine if mentoring could be offered to consumers as a vocational service.

San Diego State University (SDSU) Interwork Institute

SDSU will develop the research-based mentoring model, monitor the experimental design and data of the program, and provide a mentor training curriculum. Ultimately, SDSU will evaluate and assess the program research and make necessary modifications and recommendations to service providers.

TransAccess/East Side Union High School District (ESUHD)

TransAccess is a nonprofit agency working in partnership with business and the community. The agency creates opportunities for advances in access, social integration and employment for persons with disabilities. ESUHSD is one of the largest school districts in the county and works closely with youth with disabilities through various school programs such as the Transition

(Organizational Statement & Partner Information, continued)

Partnership Program and the WorkAbility I Program to support the educational needs of youth with disabilities. Both TransAccess and ESUHSD will be responsible for recruiting, screening and selecting mentors to be matched with referred youth/young adults. They will also supervise mentor relationships and monitor weekly and monthly reporting.

Whittier Union High School District (WUHSD)/Irvine Unified School District (IUSD)

WUHSD coordinates Career Connection, which serves the WACSEP (Whittier Area Cooperative Special Education Program) to prepare youth/young adults to transition from school to adult life. Career Connection is working with IUSD Career Link as a partner in the program development and service delivery of the mentoring project in Los Angeles/ Orange County. Career Connection and Career Link are both WorkAbility I projects, Transition Partnership Programs (TPP) and BRIDGES to Self-Sufficiency. Career Connection and Career Link have been providing school to career partnerships for youth/young adults with the assistance of the California Department of Rehabilitation, Department of Developmental Services, Department of Mental Health and others. Additional support is provided in the areas of transportation, fiscal management, benefits planning, independent living and recreation/socialization to promote adult independence.

Confidentiality Policy

It is the policy of CMI partners to protect the confidentiality of participants and their families. Program staff will only share information about mentors, mentees and their families with other professional staff and/or Board of Directors. Further, all mentors, mentees and parents/guardians will be informed of the scope and limitations of confidentiality by program staff. Additionally, all mentors are required to keep information about mentees and their families strictly confidential.

In order for CMI to provide responsible and professional service, it is necessary to ask mentors, mentees, parents/guardians and outside sources to disclose personal information about the prospective participants including:

- Information gained from mentors, mentees and families, written or otherwise, about themselves and/or families.
- Participant's name and images from program meetings, training sessions and other events.
- Information gained about participants from application forms and outside sources such as references, schools, employers and criminal record background checks.

Limits of Confidentiality

Information from mentor and mentee records may be shared with individuals or organizations as specified below:

- Information may be gathered about program participants and shared with other participants, individuals or agencies only upon a signed release form from mentor, mentee and/or parent/guardian.
- Identifying information; i.e., names, photos, videos, etc., of program participants may be used in agency publications, promotions or marketing upon written consent of mentor, mentee and/or parent/guardian.
- Information may only be provided to legal counsel or enforcement officials pursuant to a valid subpoena in the event of litigation involving service providers. Such information is considered privileged, and its confidentiality is protected by law.
- Mandatory reporting is required to take place in situations where the mentee is believed to be in danger.
- At the time a participant is considered a match candidate, information is shared between prospective candidates. However, the full identities of the prospective matches are not revealed at this point. The names, address and other personal information are shared only after the parties have met and agree to a formal match. Each party shall have the right to refuse the proposed match based on the information provided. Information shared may include:

For mentors: Age, sex, race, religion, interests, hobbies, type of employment, sexual preference, marriage or personal status, interest in mentoring, volunteer experience, why the mentor was selected as a candidate and other relevant information.

For mentees: Age, sex, race, religion, interests, hobbies, family involvement, year in school, counselor summary of client needs and expectations from match.

(Confidentiality Policy, continued)

Safekeeping of Records

The program manager is considered the custodian of confidential records. It is his/her responsibility to supervise the management of confidential information in order to ensure safekeeping, accuracy, accountability and compliance with policies. All client and mentor files must be locked and keys maintained in a location that is not accessible to unauthorized individuals.

Requesting Information from Other Agencies

A mentee's or mentor's right to privacy shall be respected by the agency. Requests for confidential information from other organizations or persons shall be accompanied by a signed release from the mentor, mentee and/or parent/guardian.

Violations

A known violation of agency policy regarding confidentiality by a participant may result in a written warning or other disciplinary actions such as suspension or termination from the program.

Mentee Access Information

Mentees can have access to their files according to the following policy and procedure:

1. The mentee must submit a formal request in writing to the staff of the program that is supervising the mentor relationship. Staff will respond to the request within five working days.
2. Staff will consult with the mentee's DOR counselor to ensure that access to the file will not cause harm to the mentee.
3. Once permission is granted, the mentee must schedule an appointment with the appropriate program staff to view his/her file. The mentee will not be allowed access to the file without a staff person present at all times.
4. If the mentee needs assistance or accommodation to read or understand the contents of his/her file, program staff will provide such assistance.
5. The mentee will not be allowed to make photocopies of any contents of the file but may write notes regarding such contents of the file.
6. The mentee is entitled to receive copies of any forms he/she has signed.

Use of Alcohol, Drugs, Tobacco and Firearms

It is the policy of CMI to prohibit the use of drugs, alcohol, tobacco and firearms by both mentor and mentee during the activities of this program. Any suspected violations should be reported to the program manager. Mentees over the age of 18 are legally permitted to use tobacco but are strongly discouraged from its use.

Any violation of this policy will result in immediate suspension or termination of the mentoring relationship. Additionally, violations of this policy may result in notifying legal authorities, which may result in arrest or other legal actions including fines and/or imprisonment.

Unacceptable Behavior

It is the policy of CMI that unacceptable behavior will not be tolerated on the part of mentors or mentees while participating in the program. This policy is in addition to behavioral requirements stipulated with other policies and procedures within this manual. This policy is not intended to replace or take precedence over other policies or procedures including:

- Confidentiality,
- Reporting of Child Abuse and Neglect, and
- Use of Alcohol, Drugs, Tobacco and Firearms.

Mentors and mentees are expected to behave in a respectful and professional manner consistent with the behavior they would exhibit in the workplace or classroom. Any behavior that is derogatory, socially inappropriate or that makes either the mentor or mentee uncomfortable is unacceptable. Any unacceptable behavior will be dealt with individually and may result in a warning or disciplinary action such as suspension or termination from the program.

Examples of unacceptable behavior include:

- Use of profanity;
- Sexually explicit or suggestive language and/or gestures or displaying/sharing such materials (i.e. magazines);
- Use of drugs, tobacco, alcohol or any other illegal or controlled substances in the presence of the mentee as well as encouraging the mentee to participate in use of such substances.
- Displaying or encouraging hostile or aggressive behavior;
- Intimidating or pressuring the mentee to do ANY activity that is uncomfortable to the mentee or that visibly causes the mentee undue or extreme stress; and
- Encouraging the mentee to participate in any risky or dangerous behavior.

Mandatory Reporting Policy

It is the policy of CMI that all staff, mentors and other representatives involved in the program are required to immediately report any *suspected* child or dependent adult abuse and/or neglect of mentees, agency clients or program participants. All reports of suspected abuse will be made to appropriate authorities. Program staff must follow the mandatory reporting procedure for child or dependent adult abuse and neglect.

All program staff, agency representatives and volunteers of CMI are required to undergo training as to what constitutes abuse or neglect, state statutes and how to properly report such cases prior to participating in the mentoring program. The program manager will work with any mentor or mentee on the reporting process to the appropriate official agencies upon the identification of any suspected abuse or neglect.

Any mentors, staff or volunteers accused of abuse or neglect will be investigated by the agency. Contact with youth or dependent adults in the program will be restricted or constrained and/or the person in question will be suspended from the program until the investigation is concluded.

Mandatory Reporting of Child Abuse and Neglect Procedure

1. All suspected incidents of abuse or neglect, recent or otherwise, must be reported to the program manager immediately.
2. The program manager will fill out an Abuse and Neglect Report form detailing critical information about the alleged incident. Once completed and reported, this form will be kept in the mentee's file.
3. The program manager will then file a report with the appropriate county authority for child abuse and Adult Protective Services for dependent adult abuse within 24 hours per state statute.
4. If knowledge of the suspected abuse/neglect occurs during non-business hours, the mentor must first try to contact CMI program manager or staff no later than the following day. If the mentor cannot immediately reach CMI staff, the mentor must decide if the incident was severe enough to call the authorities on their own.
5. In some cases the county authority or Adult Protective Services may require the mentor be interviewed or make contact directly. If so, the program manager may accompany the mentor if allowed by the governing authority.

(Mandated Reporting Policy & Procedure, Continued)

Suspected Abuse or Neglect by Mentors or Program Staff

1. The same procedures will be followed for any suspected abuse or neglect by any mentor, volunteer or program staff.
2. In addition, the alleged abuser will be investigated by the executive authority of the program partners.
3. During the investigation the alleged abuser will be restricted from contact with youth and may be placed on probation or suspended from participation in the program.
4. In the case of suspicion of a mentor, the parent/guardian will be informed.

Abuse and Neglect Reporting Form

Date: _____

Person declaring report to CMI: _____

Relationship to mentee: _____

CMI staff person reporting to authorities: _____

Reported to: _____ Date: _____
(county authority)

Name of Mentee: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Parent/Guardian: _____

Name of person(s) suspected of abuse/neglect: _____

Relationship, if any, to mentee: _____

Describe suspected abuse or neglect; include the nature and extent of injury, neglect or sexual abuse to mentee: _____

Describe, if known, the circumstances leading to suspicion that the mentee was abused or neglected:

Describe, if known, any previous accounts of injury, abuse, neglect or molestation of this mentee or others in the family situation: _____

Suggested Meeting Locations and Activities

The mentor and the mentee will discuss and determine activities and locations that best meet the goals of the mentee. Meetings should occur in neutral, comfortable and public environments.

Suggested meeting sites are:

- A workplace, office, conference room, cafeteria, etc.;
- The school site;
- A public or school library;
- A community center;
- A program provider office; and
- A museum.

Meetings should never occur at locations that are not conducive to the goals of the mentee or that may expose the mentor or the mentee to potential harm or liability, such as:

- Any private residence including the home of the mentor or mentee, a friend, family member or acquaintance;
- A bar or nightclub;
- A hotel; and
- Any place of worship.

Examples of appropriate activities include:

- Tutoring,
- Sports,
- Games,
- Company tours,
- College or community college campus tours, and
- Networking events (i.e., attending Rotary or Chamber of Commerce functions).

Supervision Protocol

Supervision

1. Once matched, the program manager or another program staff person will be assigned to support and monitor all parties involved in a given match including the mentor, mentee and parent/guardian.
2. The assigned staff person will maintain reports in the case files including the Mentor Contact Sheet.
3. Within one (1) week of the first activity date of a new match, the assigned staff person will make phone/personal contact with all parties to determine the results of the first meeting.
4. After this initial contact, the assigned staff person will follow up monthly by phone with each party to gather information regarding meeting dates, times, activities and match progress. Three (3) attempts to contact each party will be made every month before a written letter or note will be mailed requesting they call the program manager.
5. For each contact, staff will record information on the contact sheet including the following information: dates, times, activities and match progress.
6. In accordance with the Mentor Agreement, the mentor should be reminded of the monthly time commitment as needed.

Problem Resolution

7. If the program manager identifies a potential problem with the match, the program manager will attempt to clarify the potential problem and work with the mentor, mentee and/or parent/guardian to resolve the issue early.
8. The general process for problem resolution will be:
 - a) Meet with and report any difficulties or incidents to the program manager.
 - b) If counseling and recommendations from the program manager do not resolve the conflict, meet with and report any difficulties to the DOR counselor.
 - c) If counseling and recommendations from the DOR counselor do not resolve the difficulties, the match may be terminated or reassigned.
9. When the match problem involves a lack of contact on the part of the mentor or mentee, the program staff must investigate the reasons for lack of contact and make efforts to ensure the match is meeting according to the agreed upon amount of time per month.
10. If the problem continues, the program manager should consult with DOR to define a viable approach to addressing the problem and proposing potential solutions.

(Supervision Protocol, continued)

11. If the problem cannot be resolved, formal match closure may be necessary. At that time it would be determined if either or both parties are suitable for re-matching with other partners.
12. All support and supervision by program staff must be recorded in the case notes and/or on the Mentor Contact Sheet, referencing any notes included in the files.

Mentors

Mentor Recruiting Procedure

For a mentoring program to be successful recruitment of mentors and mentees is essential. Different recruitment strategies can be used depending on the agency, its mentoring focus, and expected outcomes. An annual recruitment plan should be developed with specific recruitment activities and timeline. Review of the plan should take place at least quarterly, tracking the data, determining overall effectiveness of recruitment efforts, and lastly, revising the recruitment strategy as needed.

In summary:

- Develop procedures/plan for mentor recruitment.
- Create effective marketing and promotional materials to use.
- Ensure mentoring budget includes possible recruitment costs if allowed.
- Program Coordinator will take the lead in planning a recruitment strategy in collaboration with principal staff and Advisory Committee members.
- Determine specific recruitment activities and individual responsibilities.
- Develop a timeline for proposed recruitment activities.
- Create a volunteer tracking log to summarize effective recruitment techniques.
- Review volunteer recruitment efforts quarterly and annually.
- Revise recruitment efforts as needed.

Listed below are possibilities and/or locations to consider when recruiting.

Employers and local businesses

Many companies encourage employees to volunteer in their community.

In addition, many companies have internal bulletin boards that list local civic groups and nonprofit agencies soliciting volunteers for varied causes.

Chamber of Commerce Mixers

Ask each city Chamber of Commerce for a few minutes to present your cause. Many members are often willing to sign up and/or spread the news to others.

Schools and Colleges

This is the most direct approach in recruiting both mentors and mentees. Once a school identifies with the mentoring program, teachers often recommend students as mentees and volunteer as mentors, especially since they may know students who sign-on as a mentee. Colleges and universities are great resources to recruit because many college departments lend themselves to practical areas of interest, i.e. social services, psychology, and education. For students with little work history, volunteering in a field of interest looks good on a resume.

Civic groups, clubs and organizations

Many national civic groups, local clubs, nonprofits and organizations serve as excellent recruitment sources. Employees who work in health or human service agencies may excel in having the background and knowledge in working with others and, therefore, may be excellent mentors.

(Mentor Recruiting Procedure, continued)

Volunteer websites

Numerous Internet websites exist that specialize in recruiting volunteers. This is probably the most promising recruitment tool available to reach the most individuals at any given time because it directly guides people interested in volunteering to local mentor openings. Some of these sites are VolunteerMatch.org, Mentoring.org, and CaliforniaVolunteers.org.

Networking

One of the most effective methods of recruiting is basic personal networking. This includes presenting at local/state meetings, posting flyers, sending PSAs, personally encouraging friends and neighbors, getting co-workers involved, and making announcements at meetings to solicit recruitment. Encourage BOD, Advisory Committees and mentors to spread the word.

Misc. recruitment sources to consider

Any businesses/organizations/agencies that deal with your specific mentee population (persons with disabilities, youth with incarcerated parents, mental health, etc.)

Am. Assoc. of Trainers & Developers (ASTD)

Service Corp. of Retired Execs (SCORE)

Service Corp. of Retired Executives

Advisory boards & committees

Local Chambers of Commerce

Schools/universities/colleges

Local volunteer websites

College bulletin boards

AARP chapter offices

City/college libraries

Networking groups

Local WIA centers

Council on Aging

Volunteer centers

EDD offices

AmeriCorps

Newsletters

City Year

Craigslist

Churches

MACSA

Kiwanis

YWCA

YMCA

Rotary

Lions.

Mentor Eligibility

It is the policy of CMI that each participant must meet the defined eligibility criteria. Extenuating circumstances may be reviewed at the discretion of the program manager if all requirements are not met, and acceptance may be allowed with written approval. However, these cases are expected to be rare.

Mentor Eligibility Requirements

- Be at least 21 years of age;
- Reside within CMI partner catchments;
- Be willing to adhere to all CMI policies and procedures;
- Agree to a minimum one (1) year commitment;
- Commit to spending a minimum of eight (8) hours per month in mentoring efforts;
- Take part in mentor training lasting from one to two (1-2) hours. Some mentors will be required to take extensive training that may cover one (1) full day;
- Be willing to communicate with the mentee weekly;
- Be willing to communicate regularly with the program manager and submit monthly data and activity information;
- Complete screening procedure; and
- Have never been convicted of a felony, child abuse, or molestation.

Mentor Screening Procedure

It is the policy of CMI that each mentor applicant completes a screening procedure. At minimum, the following screening procedures are required in order to determine if a candidate qualifies to become a mentor. Program staff must ensure that these screening procedures are completed for each applicant.

1. Applicants must return all completed materials in the application packet given to them during the inquiry process, including:

- Completed Application and Questions,
- Personal Reference Form,
- Mentor Interest Survey,
- Information & Photo Release, and
- Personal Reference Form.

2. A file should be created for each prospective mentor who returns a completed application packet. The file should contain the following:

- All Application Materials,
- Personal Reference Interviews,
- Mentor Interview Form and any notes,
- Mentor Assessment Summary,
- Completed criminal history and child abuse registry checks,
- Copy of Mentor Acceptance or Rejection letter,
- Mentor Contact Sheet, and
- Signed Mentor Agreement.

As each component of the screening process is completed, the Mentor Assessment Summary checklist should be updated.

3. Mentoring program staff members do the following:

- Make an appointment and conduct an in-person interview with the prospective mentor,
- Conduct phone interviews with three (3) personal references, and
- Process the criminal history and child abuse registry checks.

4. Based on all information gathered above, complete the Mentor Assessment Summary and make a determination as to the appropriateness of the participant's involvement in the program.

(Mentor Screening Procedure, continued)

5. Send out an acceptance or rejection letter to the applicant based on the overall assessment of appropriateness.
6. If applicant is rejected, the applicant's file should be placed into the file area of ineligible applicants.
7. If the applicant is accepted, the mentor must complete an initial training session prior to meeting any prospective mentees and sign the Mentor Agreement.

The decision to accept an applicant into the program will be based upon a final assessment reviewed by program staff at the completion of the screening process. The program manager has final approval for an applicant's acceptance into the program. No reason will be provided to mentor applicants who are not accepted to the CMI program.

A Note About Mentor Training

It will be the policy of CMI partners to provide mentors with specific training prior to making mentor/mentee matches. All participants will receive basic training including mentor roles, program guidelines, responsibilities, disability etiquette, safety issues and related communication/relationship-building skills. Mentors will be notified of training dates, time and location.

Reporting of abuse or neglect is mandated by the training policy and procedure and is included as a required topic in the training outline for mentors and mentees. CMI program managers will support mentors/mentees in identifying and reporting suspected abuse and neglect to official agencies.

Evaluation forms may be collected after training sessions for the purpose of evaluating and improving the content of training and trainer performance.

Mentor Application Packet

Introduction

Program Information

The California Mentoring Initiative for Youth with Disabilities (CMI) is a new and exciting five (5)-year project that hopes to empower youth/young adults in the community to make positive life choices that will enable them to maximize their potential. The program uses adult volunteers to support and guide a youth/young adult for a minimum period of one (1) year. By becoming part of the network of adults and community members who care about the youth/young adult, the mentor can help the mentee develop and reach positive academic, career and personal goals.

Mentor Role

- Take the lead in supporting the mentee through an ongoing, one-to-one relationship,
- Serve as a positive role model,
- Build mentee's self-esteem and motivation,
- Help mentee set goals and work toward accomplishing them,
- Build the relationship by planning and participating in activities together, and
- Strive for mutual respect.

Serving as a mentor is a serious commitment. You will be serving as a role model for youth. Each mentor brings collective talents and life experiences to share with youth on their own road of discovery. Every mentoring match will have different results. It is hoped that each mentoring match will make a positive impact in a youth/young adult's life.

Additionally, we hope you have fun during your mentor sessions and look forward to continuing!

Contact Information

If you have questions or need more information, please contact the following:

After completing this application packet, please return to:

Personal Information

Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ Cell Phone: _____

E-mail: _____

Date of Birth: ____/____/____ Gender: Male Female

Ethnicity: _____

Languages Spoken (including American Sign Language): _____

How did you hear about the CMI mentoring program? _____

Education History: Place an X by the appropriate response.

High School: _____ GED _____ Diploma

Community College: _____ AA _____ AS Major: _____

College/University: _____ BA/BS _____ MA/MS _____ PHD Major: _____

_____ Other: _____

Regional Occupational Program: _____

Occupational Certificate: _____

Other: _____

Please identify any accommodations needed for interview or training:

Personal References

Applicant Name: _____

Please list the names, addresses and phone numbers of three (3) people not related to you that you would like to use as character references. List people whom you have known for at least one (1) year. Include at least one (1) relative. Any information CMI gathers from these references will be held as confidential and not released to you, the applicant.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number (Day): _____ E-mail: _____

Name: _____

Address: _____

Phone Number (Day): _____ E-mail: _____

Relationship: _____ How long known: _____

Name: _____

Address: _____

Phone Number (Day): _____ E-mail: _____

Relationship: _____ How long known: _____

Mentor Application Questions

Applicant Name: _____

Please answer all of the following questions as completely as possible. If more space is needed, use an extra sheet of paper or write on the back of this page.

1. Why do you want to become a mentor? _____

2. Do you have experience volunteering, mentoring or working with youth/young adults?
No Yes--please specify: _____

3. What, if any, concerns do you have about working with individuals with disabilities? _____

4. What qualities, skills or other attributes do you feel you have that would benefit a youth/young adult? Please explain. _____

5. Can you commit to participating in the CMI Mentoring Program for a minimum of one (1) year, be available to meet with a mentee eight (8) hours per month and have contact at least once per week from the time you are matched with a youth/young adult? Yes No
Please explain any particular scheduling issues. _____

6. How would you describe yourself as a person? _____

7. How would your friends, family and co-workers describe you? _____

Certification & Signature Page

Applicant Name: _____

Please read the following before signing:

The CMI Mentoring Program appreciates your interest in becoming a mentor.

I agree to communicate regularly with program staff, provide monthly information regarding my mentoring activities and receive feedback regarding any difficulties during my participation in the mentoring program.

I agree to attend an initial mentor training session and additional training when requested.

I agree to follow all mentoring program guidelines and protocol. I understand that any violation may result in suspension or termination of the mentoring relationship.

I understand that CMI is not obligated to provide a reason for their decision to accept or deny me as a mentor.

I agree to keep all personal information on the mentee confidential and private.

I understand that the CMI Mentoring Program may not be able to match me with a mentee but a good faith effort will be made to do so.

I understand I must return all of the following *completed* items included in the application packet and that any incomplete information will result in the delay of my application being processed:

- Mentor Application and Questions,
- Personal Reference Forms,
- Interest Survey Form, and
- Information & Photo Release Form.

I understand that all staff, mentors and other representatives involved in the program are required to immediately report any *suspected* child or dependent adult abuse and/or neglect of mentees, agency clients or program participants.

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

Signature

Date

Mentor Interest Survey

Name: _____ Date: _____

Please complete the following. This survey will help the CMI Mentoring Program know more about you and your interests and help us find a good match for you.

1. What are the most convenient times for you to meet with your mentee? Please check all that apply.

Weekdays: _____ Lunchtime: _____ After school: _____

Evenings: _____ Weekends: _____ Other: _____

2. Please indicate age group(s) you are most interested in working with:

Age: _____ 16-18 _____ 19-22 _____ 23-26 _____ No preference

3. Do you have a preference and/or experience that would allow you to work better with an individual of a specific ethnic background or culture? _____

4. Do you speak any languages other than English (including American Sign Language)? If so, which languages? _____

5. What are some favorite activities you like to do with other people? _____

6. What are your favorite reading subjects? _____

7. What jobs have you had, currently or in the past that may be of interest to a youth/young adult?

8. Describe any hobbies, unique experiences or activities that you bring to a potential mentee:

9. Please check all activities you participate in:

<input type="checkbox"/>	Biking	<input type="checkbox"/>	Camping	<input type="checkbox"/>	Science	<input type="checkbox"/>	Cooking/Dining Out	<input type="checkbox"/>	Reading
<input type="checkbox"/>	Hiking	<input type="checkbox"/>	Boating	<input type="checkbox"/>	Music	<input type="checkbox"/>	Sports	<input type="checkbox"/>	Relaxation
<input type="checkbox"/>	Exercise	<input type="checkbox"/>	Arts and Crafts	<input type="checkbox"/>	Parks/Nature	<input type="checkbox"/>	Automobiles	<input type="checkbox"/>	Video Games/Computer
<input type="checkbox"/>	Fishing	<input type="checkbox"/>	Pets/Animals	<input type="checkbox"/>	Movies	<input type="checkbox"/>	Board Games	<input type="checkbox"/>	Shopping

10. List any other strong areas of interest and other comments that would help us facilitate a relationship between you and a mentee: _____

Mentor Personal Reference Interview

Applicant Name: _____ Date: _____

Interviewed by: _____

Personal Reference Name: _____

Personal Reference Phone Number: _____

Your name has been given to us as a reference for _____

(mentor applicant), who has applied to be a mentor in our program. I would like to ask you some questions about him/her. Your answers will be held in absolute confidence and will not be shared or accessible to him/her. Would you be willing and is this a good time for you to answer a number of questions?

1. How long, and in what capacity, have you known the applicant?
2. How would you describe the applicant, and what special assets or qualities does the applicant have?
3. Does the applicant relate well to people in general, and do you think that the applicant relates well to youth/young adults and would be a good mentor and role model? Please provide specific examples.
4. Can you provide any examples of why you feel this person will work well with others, especially youth/young adults?
5. Our program works with youth/young adults that have disabilities. Do you feel this person is flexible and understanding enough to work with this population?
6. Do you believe this person to be dependable and reliable?

7. Do you know of any problems or issues that would affect the applicant's ability to work with a youth/young adult?

8. Do you have any additional comments about the applicant?

Interviewer Comments:

Mentor Interview Form

Applicant Name: _____ Date: _____

Interviewed by: _____

As a mentor applicant you will be asked a number of questions during this interview to help staff make the most appropriate mentor match and to supplement to answers on your application. Some of the questions may be very personal and will be kept confidential. However, some of the information on personal qualities, interests, etc. may be shared with a prospective mentee and parent/guardian.

All information will be kept strictly confidential except as noted above.

1. Why do you want to become a mentor?

2. Why do you think you can be of help to a youth/young adult by mentoring?

3. What do you think are your greatest strengths?

4. What are your weaknesses?

5. What type of person would you like to be matched with?

6. Will you be able to commit to mentoring eight (8) hours per month for a minimum of one (1) year?

7. Do you have experience working with youth/young adults? If so, doing what?

8. What do you feel are some of the biggest challenges facing young people today?

9. What do you hope to gain from your mentoring experience?

10. Will you be able to mentor at your own job site?

11. What types of activities do you anticipate doing with your mentee?

12. Do you have any experience/knowledge working with persons with disabilities?

13. Do you have any hesitations or concerns in working with persons with disabilities?

14. Do you have any specific questions or concerns about the mentoring program?

15. Do you need any accommodations to assist you in mentoring?

Interviewer Comments: _____

Mentor Information and Photo Release

Please read the following before signing:

I, _____ (print name), understand that to participate as a mentor in CMI, I must allow the staff to conduct a background check regarding driving record, criminal history and personal references.

I understand that once a mentor/mentee match is determined, my identity and profile may be shared with the mentee and parent/guardian to ensure a safe and successful relationship.

I agree to allow CMI to use any photographs of me or comments I make while participating in the program or related surveys. I understand these images or comments may be used for promotional/marketing or publicity purposes.

Signature

Date

THE ABOVE HAS BEEN READ TO ME and/or SHOWN IN A MANNER THAT I UNDERSTAND AND WAS WITNESSED BY:

Signature

Date

Mentor Agreement

The CMI Mentoring Program appreciates your interest in becoming a mentor.

Serving as a mentor is a major commitment. Mentors serve as guides, advisors and role models. Mentors share with mentees a variety of positive learning experiences by helping mentees prepare for continued schooling, making career decisions, enhancing self-esteem, communications and the ability to cope with real life situations.

Please read the following carefully before signing:

Mentors are required to:

- ✓ Complete an application packet.
- ✓ Submit to DMV check and fingerprint scanning for security clearance.
- ✓ Meet with CMI staff for initial mentor interview.
- ✓ Commit to a minimum one (1) year involvement.
- ✓ Commit to at least eight (8) hours per month of weekly mentoring activities.
- ✓ Take part in mentor orientation and training sessions.
- ✓ Commit to initial meeting with mentee, parent/guardian or DOR counselor.
- ✓ Provide data/information on mentor/mentee activities monthly.
- ✓ Contact CMI staff should situations arise, personal or otherwise, that cannot be resolved.
- ✓ Keep all personal information regarding your mentee confidential.
- ✓ Follow all rules and guidelines as outlined by the program manager, mentor training, program policies and this Agreement.
- ✓ Be on time for scheduled meetings or call mentee at least 24 hours beforehand if unable to make a meeting.
- ✓ Never be in the presence of mentee when or after consuming alcohol, tobacco or controlled substances.
- ✓ Notify the program manager of any changes in address, phone number or employment status.

I understand that upon match closure, future contact with my mentee is beyond the scope of CMI and may occur only by the mutual consent of the mentor, the mentee and/or parent/guardian.

I understand that all staff, mentors and other representatives involved in the program are required to immediately report any *suspected* child or dependent adult abuse and/or neglect of mentees, agency clients or program participants.

I agree to communicate regularly with program staff, provide monthly information regarding my mentoring activities and receive feedback regarding any difficulties during my participation in the mentoring program.

I understand that CMI is not obligated to provide a reason for their decision to accept or deny me as a mentor.

(Mentor Agreement, continued)

I understand that the CMI Mentoring Program may not be able to match me with a mentee but a good faith effort will be made to do so.

I understand I must return all of the following *completed* items included in the application packet and that any incomplete information will result in the delay of my application being processed:

- Mentor Application and Questions,
- Personal Reference Forms,
- Interest Survey Form, and
- Information & Photo Release Form.

I understand that all staff, mentors and other representatives involved in the program are required to immediately report any *suspected* child or dependent adult abuse and/or neglect of mentees, agency clients or program participants.

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions as well as any other conditions as instructed by the program manager at this time or in the future. I understand that any violation may result in suspension or termination of the mentoring relationship.

Print Name

Signature

Date

Mentor Assessment Summary

Applicant: _____ Date: _____

Screening Materials

Screening Materials	Date Sent to Applicant	Date Received from Applicant	Date Sent to Agency	Date Item Completed
Written Application				
Application Questions				
Personal Reference Form				
Interest Survey				
Information & Photo Release				
Copy of Driver's License/CA ID (optional)				
Live Scan results				
Interview Form & notes				
Personal Reference Interview				
Personal Reference Interview				
Personal Reference Interview				
Acceptance/Rejection Letter				
Agreement				

Eligibility Criteria

Does the applicant meet each of the eligibility criteria listed below? Check appropriate box.

Yes	No	Criteria
		21 years if age or older
		Resides in catchments
		Willing to adhere to program policies and procedures
		Agrees to one (1) year commitment
		Commits to eight (8) hours per month
		Agrees to weekly contact with mentee
		Completed screening procedure
		Agrees to attend required training sessions
		Willing to communicate regularly with program coordinator and submit monthly meeting and activity information
		Has reliable transportation
		Has current driver's license
		Has clean criminal history or has not been convicted of a felony

(Mentor Assessment Summary, continued)

Does the mentor applicant meet all eligibility criteria? Yes _____ No _____

If no, are there any mitigating circumstances? _____

General Assessment Areas

Did the applicant relate appropriately to the program staff during the following steps?

Initial contact and inquiry	Yes _____	No _____
Orientation	Yes _____	No _____
Interview	Yes _____	No _____

Did the applicant complete the screening process with ease and appropriateness? Yes _____ No _____

Are his/her reasons for wanting to be a mentor appropriate? Yes _____ No _____

Are the applicant's personal and professional lives appropriate and stable? Yes _____ No _____

Does the applicant exhibit qualities of open-mindedness, flexibility and emotional stability? Yes _____ No _____

Does the applicant have experience working with youth/young adults? Yes _____ No _____

Do the applicant's references speak well of him/her? Yes _____ No _____

Does the individual have age-appropriate interests and abilities? Yes _____ No _____

Overall Comments: _____

(Mentor Assessment Summary, continued)

Recommendation:

Recommend approval: Yes _____ No _____

Supporting Reasons: _____

Approval:

Applicant Approved as Mentor: Yes _____ No _____

By: _____ Date: _____

By: _____ Date: _____

By: _____ Date: _____

Mentor Acceptance Letter

Dear

Congratulations!

On behalf of the California Mentoring Initiative for Youth with Disabilities, we are happy to inform you of your acceptance as a mentor. Without the enthusiasm of volunteers like you, we would not be able to offer our program to youth/young adults with disabilities and accomplish our mission.

Serving as a mentor is a serious commitment. You will be serving as a role model for youth/young adults. Each mentor brings collective talents and life experiences to share with youth/young adults on their own road of discovery. Every mentoring match will have different results. It is hoped that each mentoring match will make a positive impact in a youth/young adult's life.

We thank you for taking the time and effort to apply and look forward to continuing to support and assist you as a mentor. We are currently working on finding a suitable match for you and will contact you once a mentee is selected.

We hope you have fun during your mentor sessions and look forward to continuing!

Sincerely,

Mentor Rejection Letter

Dear

On behalf of the California Mentoring Initiative for Youth with Disabilities, we want to express our sincere thanks for your interest in applying with our mentoring program. We understand that you have given a considerable amount of time to this process and greatly appreciate your efforts. Unfortunately, we are unable to accept your application to serve as a mentor in our program.

Thank you again for your time and interest in our program.

Sincerely,

Item	Date	Initials
Completed Mentor Application		
Personal Reference Interview (1 of 3)		
Personal Reference Interview (2 of 3)		
Personal Reference Interview (3 of 3)		
Mentor Interview Form		
Agreement		
Acceptance/Rejection Letter (copy)		
Assessment Summary (3 pages)		
Copy of Driver's License/California ID		
Copy of Automobile Insurance		
Volunteer Packet (Sent to Applicant: _____)		
Live Scan results		
TB Results		
DMV Check (sent to DMV _____)		
Training Attendance Log (copy)		
Mentor Contact Sheet		
Match Worksheet		
Mentee Emergency Information Sheet (copy given)		
Match Closure Form		
Mentor Exit Survey (2 pages)		

Mentor Training

Sample Agenda

4:30 PM	Welcome
5:00	Overview of Mentor Training <ol style="list-style-type: none">1. CMI Program Information2. Mentorship3. Disability4. Diversity5. Communication6. Self Determination
5:30	Roles & Responsibilities
6:30	Break
6:45	Disability & VR
7:30	Diversity Issues & Mentoring
8:00	Communication & Relationship Building
8:15	Break
8:30	Self Determination & Independence
9:00	CMI website
9:15	Q & A
9:30	Conclusion

Overview of Mentor Training

1. CMI Program Information

The California Mentoring Initiative for Youth with Disabilities (CMI) is a new and exciting five (5)-year project that hopes to empower youth/young adults in the community to make positive life choices that will enable them to maximize their potential. The program uses adult volunteers to support, guide and be a role model to a youth/young adult for a minimum period of one (1) year. By becoming part of the network of adults and community members who care about the youth/young adult, the mentor can help the mentee develop and reach positive academic, career and personal goals.

2. Mentorship

Serving as a mentor is a major commitment. Mentors serve as guides, advisors, friends and role models. Mentors share with mentees a variety of positive learning experiences by helping mentees prepare for continued schooling, making career decisions, enhancing self-esteem, communications and the ability to cope with real life situations. In this program, mentors are required to:

- Complete an application packet.
- Submit to DMV check and fingerprint scanning for security clearance.
- Meet with CMI staff for initial mentor interview.
- Commit to a minimum one (1) year involvement.
- Commit to at least eight (8) hours per month of weekly mentoring activities.
- Take part in mentor orientation and training sessions.
- Commit to initial meeting with mentee, parent/guardian or DOR counselor.
- Provide data/information on mentor/mentee activities monthly.
- Contact CMI staff should situations arise, personal or otherwise, that cannot be resolved.
- Follow all rules and guidelines as outlined by the program manager, mentor training, program policies and this contract.
- Be on time for scheduled meetings or call mentee at least 24 hours beforehand if unable to make a meeting
- Never be in the presence of mentee when or after consuming alcohol, tobacco or controlled substances.
- Notify the program manager of any changes in address, phone number or employment status.

3. Disability and the VR Process

In this training we will answer the following questions:

- What is disability?
- How do we work with people with disabilities?
- What can people with disabilities do?

- What is VR?

(Overview of Mentor Training, continued)

4. Diversity Issues and Mentoring

In this training, we will examine several aspects of working with a diverse population and how these aspects may affect the mentoring relationship.

5. Communication

Establishing rapport with the mentee is key to success. In this training we will discuss relationship building, boundary setting, and handling difficult issues.

6. Self-determination

Our goal is to provide an opportunity for the youth to build self-esteem and confidence to live independent lives. The CMI Program intends to impact youth with disabilities with mentor opportunities for development and focus on their abilities to pursue their dreams.

Mentorship

1. What is a mentor?
2. What is mentoring?
3. What are mentor expectations?
4. Mentor role

As a mentor you should:

- Take the lead in supporting the mentee through an ongoing, one-to-one relationship;
- Serve as a positive role model;
- Build the relationship by planning and participating in activities together;
- Strive for mutual respect;
- Build mentee's self-esteem and motivation; and
- Help mentee set goals and work toward accomplishing them.

Serving as a mentor is a serious commitment. Each of you will be serving as a role model for a young adult. Each mentor brings collective talents and life experiences to share with a young adult on their own road of discovery. Every mentoring match will have different results. It is expected that each mentoring match will ultimately, over time, make a positive impact in a student's life. Additionally, we hope you have fun during your mentor sessions and look forward to continuing!

Disability Awareness

1. Twelve Tips for Speaking about Disability

- Do not refer to a person's disability unless it is relevant.
- Disability and disabled are the terms of choice. Describe a person as "disabled" rather than "handicapped." While handicapped was the descriptor of choice in the 1960's and early 1970's, it is no longer appropriate to use when describing a person.
- What is good for the goose is not always good for the gander. Although you may hear people with disabilities refer to themselves as "handicapped," "crippled" or "gimp," if you are not disabled you should never use these slang terms.
- Avoid euphemisms. The struggle to agree upon a "neutral" term has generated new flavor-of-the-day terms such as "physically (or mentally) challenged," "differently-abled" and "handicapable." These terms, while well intending, are offensive to some people with disabilities. Such terminology has not been widely embraced by the disability community and should be avoided.
- Avoid medical language. Do not refer to people with disabilities as "patients" unless you are specifically discussing their treatment in a medical facility. Never say "invalid."
- When referring to a person's disability, make an effort to use Person First Language. In other words, when necessary, it is better to say "Jake is a person with a disability" than "Jake is a disabled person". The phrase "disabled person" is a generally accepted (although not preferred) variation to avoid over-use of the phrase "people with disabilities". For variation, it is appropriate to refer to "entrepreneurs with disabilities" when writing or talking about business owners who happen to be disabled.
- Call a spade a spade. Do not use the term "special" when you mean separate or segregated. And do not use the word "special" when you mean disabled. "Special" has negative connotations within the disability community.
- Avoid inappropriate adjectives and ridiculous constructions such as "disabled seating" or "blind organization." Think through the concept to find a cleaner, more accurate way to express it, such as "accessible seating" or "reserved seating" and "organization of people who are blind."
- Avoid negative or sensational descriptions of a person's disability. Do not use emotionally charged language such as "suffers from," "victim of" or "afflicted with." These portrayals elicit unwanted sympathy, or worse, pity toward individuals with disabilities.
- Do not portray people with disabilities as overly courageous, heroic, brave, special, inspiring or superhuman. This implies that it is unusual for people with disabilities to have talents or skills. Never say an individual "overcame" her disability or accomplished something "in spite of" her disability. These concepts are flawed and are based on misconceptions about what it means to have a disability.
- Do not use "normal" to describe people who do not have disabilities. It is better to say "people without disabilities," if necessary to make comparisons. Also avoid euphemisms like "temporarily able-bodied."
- Never say "wheelchair-bound" or "confined to a wheelchair." Instead, refer to the individual as "a wheelchair user" or "a person who uses a wheelchair." People who use mobility equipment, if anything, are liberated by the freedom and access these devices afford.

(Disability Awareness, continued)

2. Types of Disability

A) Learning Disabilities

Definition:

- Learning disabilities are manifested by significant difficulties in listening, speaking, reading, writing, reasoning and/or mathematical ability.
- The primary problems do not involve collecting information (as in sensory disabilities), but in interpreting, translating or recalling information.
- People with learning disabilities often have trouble learning sequences or tasks. However, learning disabilities do not denote inferior intelligence. In fact, a majority of individuals with learning disabilities have normal intelligence and are fully capable of performing complex tasks that are not impeded by their disabilities.

Suggestions to Improve Access and Positive Interactions:

- Be aware that occasional inattentiveness, distraction or loss of eye contact by a person with a learning disability is not unusual.
- When communicating with a person with a learning disability, discuss openly the preferred way to communicate.
- Be sensitive to the fact that some information processing may affect social skills.

B) Attention Deficit Hyperactivity Disorder (ADHD or ADD)

Definition:

- ADHD/ADD is a persistent pattern of behavior of inattention, hyperactivity and impulsiveness that is more frequent and severe behavior seen in individuals of a similar age.
- ADHD is behavioral in nature and is characterized by impulsiveness and an inability to pay attention for more than a few minutes. This may cause some students to make mistakes in schoolwork or other tasks, but these mistakes are a result of their ADHD, not their ability to learn.

Suggestions to Improve Access and Positive Interactions:

- Be patient when communicating with someone with ADHD
- Give positive reinforcement
- Decrease the length of tasks and divide tasks into smaller parts to be completed at different times
- Take frequent breaks
- Keep a consistent schedule

C) Mental Illness

Definition:

- Mental illnesses are biological brain disorders that can critically interfere with a person's ability to think, feel and relate to other people and the environment.

(Disability Awareness, continued)

Suggestions to Improve Access and Positive Interactions:

- Remember that people with mental illness do not have lower intelligence
- Be aware that people with more severe mental illnesses may have difficulty processing or expressing emotions
- Be sensitive to the fact that some people with mental illness may overreact to emotionally charged topics or conversations
- Learn more about the nature of a person's diagnosed mental illness

D) Blindness and Visual Impairments

Definition of low vision:

- This generally refers to a severe visual impairment not necessarily limited to distance vision.
- Low vision applies to all individuals with sight who are unable to read the newspaper at a normal viewing distance, even with the aid of eyeglasses or contact lenses.

Definition of legally blind:

- This indicates that a person has less than 20/200 vision in the better eye (with corrective lenses) or a very limited field of vision (20 degrees at its widest point).

Definition of visual impairment:

- This is the condition of having some usable vision.
- People with severe visual impairments cannot read newsprint with glasses.
- Visual impairments also include conditions such as tunnel vision and color blindness.
- People who have congenital blindness have been without sight since early childhood or birth. People who have adventitious blindness lost their sight later in life. It is important to differentiate between these two conditions because of the diversity among people with these two different types of blindness.

Suggestions to Improve Access and Positive Interactions:

- To guide a person who is blind, let him or her take your arm. If you encounter steps, curbs or other obstacles, identify them and pause briefly before proceeding.
- Speak directly to the person in a normal tone and speed.
- Do not pet or play with a working guide or service dog.
- When entering or leaving a room, say so.
- When a person who has a visual impairment is meeting many people, introduce them individually.
- Remove displays or other objects; avoid clutter; use large letter signs; raise low-hanging signs or lights.
- Use alternative formats for written materials.

E) Deafness and Hearing Impairments

Definition:

- According to the National Center for Health Statistics, there are approximately 20 million Americans who have some degree of hearing impairment, ranging from mild to profound.

(Disability Awareness, continued)

- Some people have hearing losses of the outer or middle ear that can be assisted through the use of hearing aids or surgery, while others have more severe hearing losses of the inner ear, which produce sound distortions.
- It is important to understand that for people who are deaf, the major issue is not their inability to hear, but the challenges they experience in communicating with hearing people.
- Many persons who are deaf prefer to communicate using sign language. Speech reading (also known as lip reading), cued speech and writing are also used as communication tools.

Suggestions to Improve Access and Positive Interactions:

- Using a normal tone, speak clearly and distinctly.
- Use facial expressions, body language and pantomime.
- If a sign language interpreter is involved, speak directly to the person who is deaf, not the interpreter.
- Ask the person to repeat himself or herself if you do not understand.
- Avoid standing in front of a light source or window that might silhouette your face, making it difficult to see you clearly.
- Install a Teletypewriter (TTY) in your office.
- Learn how to find a sign language interpreter on short notice.
- Arrange for people with hearing impairments to sit near the speaker in lecture/performance situations.

F) Mobility Impairments

Definition:

- Mobility impairments include a broad range of disabilities that affect a person's independent movement and cause limited mobility.
- Mobility impairments may result from cerebral palsy, spinal cord injury, stroke, arthritis, muscular dystrophy, amputation, polio or other conditions.
- According to the National Center for Medical Rehabilitation Research, an estimated 25 million people have mobility impairments, which may take the form of paralysis, muscle weakness, nerve damage, stiffness of the joints, or lack of balance or coordination.

Suggestions to Improve Access and Positive Interactions:

- Do not hold on to a person's wheelchair. It is a part of the person's body space and touching it or leaning on it are both inappropriate and dangerous.
- Talk directly to a person using a wheelchair, not to an attendant or third party.

- During a conversation with a person using a wheelchair, consider sitting down in order to share eye level.
- Avoid inappropriate terms such as “cripple,” “confined to a wheelchair,” “bed-ridden,” “wheelchair-bound,” “deformed” and “suffering from a disability.” Instead, use terms such as “person with a physical disability” or “person who uses a wheelchair.”
- If a person appears to have little grasping ability, do not be afraid to shake hands.

(Disability Awareness, continued)

G) Acquired Brain Injury

Definition:

- Acquired brain injuries are caused by external physical forces applied to the head that occur suddenly in the course of normal development.
- The most common causes of acquired brain injuries are automobile accidents, falls, assaults and sports injuries.
- Acquired brain injuries typically result in total or partial brain damage that is diffuse or widespread; it is not usually confined to one area of the brain. Thus, impairments are multiple and can affect both cognitive abilities and physical functioning.

Suggestions to Improve Access and Positive Interactions:

- Repeat important information about the purpose, duration and guidelines for a workshop, class or meeting.
- Keep the environment distraction-free.
- Be aware that impulsiveness, irritability or egocentric behavior are possible from a person with an Acquired Brain Injury.
- Accentuate positive gains using frequent praise.

The Americans with Disabilities Act

1. The Americans with Disabilities Act (ADA) Background
 - The ADA was passed to address and eliminate the major forms of discrimination faced daily by people with disabilities and represents the most important civil rights legislation passed since the 1964 Civil Rights Act.
2. ADA and Definition of Disability
 - In order to receive the protections of the ADA, a person must satisfy at least one of three conditions:
 - Have a physical or mental impairment that substantially limits one or more major life activities, such as hearing, seeing, walking, breathing or speaking;
 - Have a record of a substantially limiting impairment to a major life activity, such as a person who has recovered from cancer or an individual previously categorized as having a learning disability; or
 - Be misperceived as having a substantially limiting impairment, which in reality is not substantial, such as controlled high blood pressure; or does not cause any substantial limitations, such as a facial scar or physical disfigurement.
3. ADA and Employment
 - The employment provisions of the ADA prohibit discrimination in all job-related practices and activities.
 - The ADA requires that all employment decisions be made without reference to the existence or consequence of disability.
 - Employers are required to provide reasonable accommodations for workers with disabilities when such accommodations would not impose any undue hardship such as significant difficulty or expense to the overall business operation. The term “reasonable accommodation” may include such things as:
 - Making the workspace physically accessible
 - Acquisition or modification of equipment or devices
 - Job restructuring, or modified work schedules
 - Appropriate adjustment or modifications of training materials or policies
 - Provision of qualified readers or interpreters

If an individual does not request an accommodation, an employer is not obligated to provide one.

4. Architectural and Communication Barriers

- Title III of the ADA specifies that discrimination includes a failure to remove architectural or communication barriers in existing facilities if such removal is readily achievable (i.e., accomplishable without much difficulty or expense).
- Examples include adjustments such as adding grab bars in restrooms, lowering public telephones or adding Braille markings on elevator control buttons.

5. Discrimination and Other Barriers

- An attitudinal barrier is defined as a way of thinking or feeling that results in behavior that limits the potential of people with disabilities to function independently.

(The Americans with Disabilities Act, continued)

- The vast majority of the American public is neither positive nor negative toward people with disabilities. Most people just prefer not to think about disability at all.
- In order to overcome these attitudinal barriers, it is important that people educate themselves about the facts of disability and participate in community programs that include all people.
- Suggestions to improve access and positive interactions:
 1. Offer assistance if asked, but do not insist.
 2. Focus on the abilities of every person, rather than on their disabilities.
 3. Be aware of limitations specific to a disability, but do not be overprotective.
 4. Make sure that parking areas, restrooms, and buildings in which you provide services or conduct meetings are architecturally and environmentally accessible to all people.
 5. Remember that accessibility to the full range of services you provide is legally required.
 6. Conduct outreach efforts to publicize your programs to people with disabilities.
 7. Ask a person with a disability to facilitate disability awareness training sessions with your staff to promote positive attitudes.
 8. Involve people with disabilities on advisory boards, planning committees, in positions of authority, and in the planning and presentation of programs.
 9. Assume responsibility for understanding the issues that affect people with disabilities.

Assistive Technology Devices

1. Assistive Technology (AT) Devices Defined

- An AT device is any item, piece of equipment, or product system, whether acquired commercially or off the shelf, modified or customized, that increases, maintains, or improves functional capabilities of individuals with disabilities.
- AT devices can be anything from a simple tool with no moving parts (e.g. a toothbrush with a built-up handle) to a sophisticated mechanical/electronic system (e.g. a robotic arm).
- Simple, mechanical devices are often referred to as low-tech devices while computer-driven or complex AT may be called high tech. However, many people in the AT field have argued that this complexity-based classification is not a useful one as there is no clear division between simple or low tech and complex or high tech devices.
- With the passage of the Rehabilitation Act Amendments of 1992 (PL 102-569), AT devices are now included as part of rehabilitation technology

2. Some Examples of Assistive Technologies

Assistive Devices for Mobility:

- Products that help mobility impaired persons move within their environment and give them independence in personal transportation.
- Includes standing/walking aids, transfer aids, stair lifts, walkers, scooters, wheelchairs and three-wheeled chairs, adapted bikes and Trikes, car seats/bed, stretchers, patient chairs, ramps, recliners, strollers, travel chairs, wheelchair trays, driving controls, seat belts, vehicle conversions, patient and wheelchair lifts, wheelchair loaders/carriers, wheelchair restraint systems, etc.

Assistive Devices for Speech

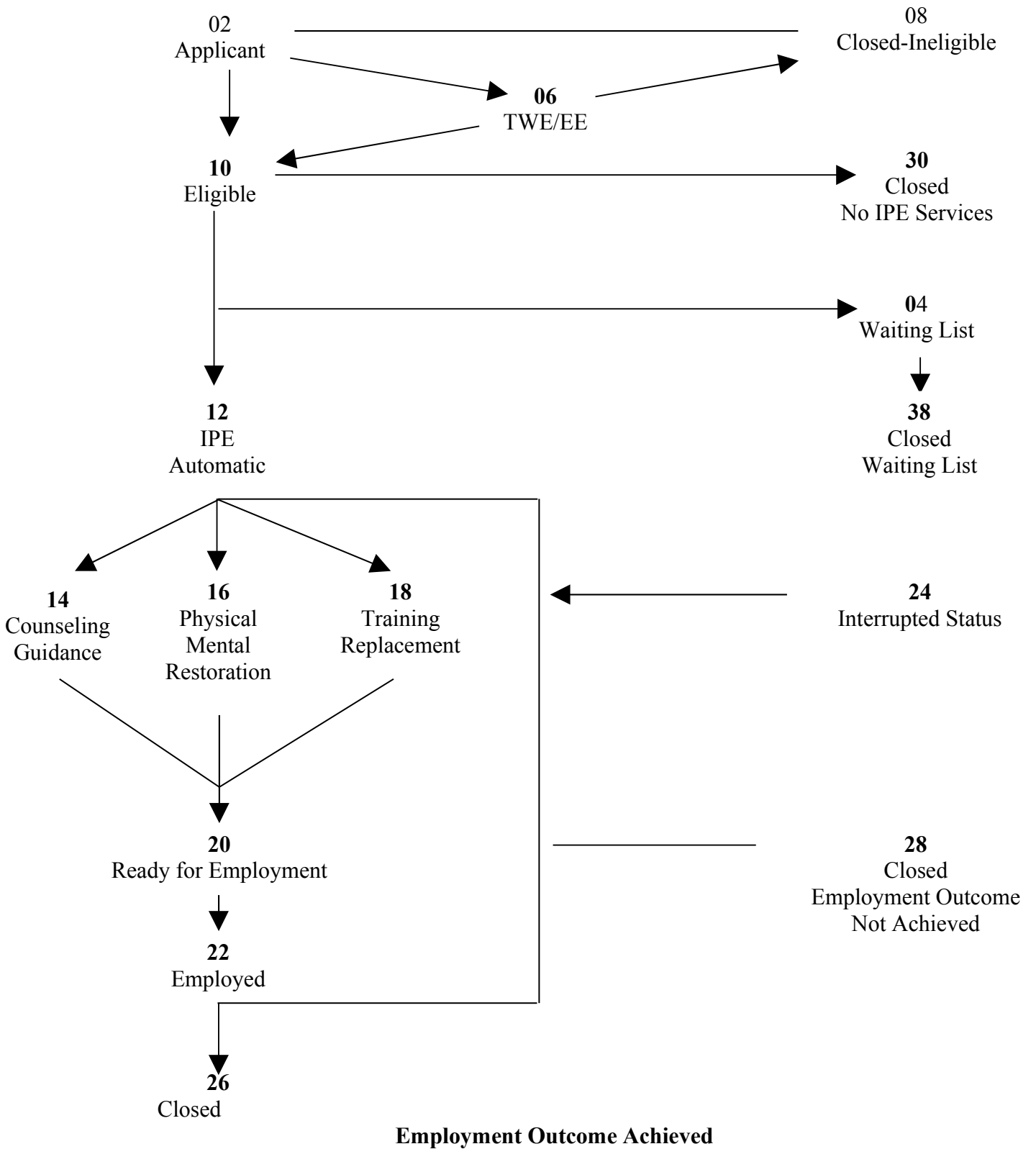
- Alternative and Augmentative Communication (AAC) involves alternate methods of communicating needs, feelings, ideas, and perceptions through the use of electronic and non-electronic devices that provide a means for expressive and receptive communication for persons with limited or no speech.
- Includes communication boards, speech synthesizers, text-to-speech software and hardware, head wands, light pointers, mouth sticks, signal systems, telephony equipment, etc.

Assistive Devices for Vision

- Products designed to assist the Blind and visually impaired.
- Includes auditory and speech output devices, reading machines, scanning/document reading systems, OCR systems, electronic book readers, talking equipment (clocks/watches, calculators, etc.), Braille devices, Braille transcription and translation devices, screen

magnifier/enlarger, closed circuit television (CCTV) for magnifying documents, book holders, manual and electric page turners, large button phones, speaker phones, large print books, taped/audio books, etc.

The VR Process Flowchart



Definitions of VR Status Codes

STATUS 02 – APPLICANT

The individual with a disability has requested services, submitted the minimum information necessary to initiate an assessment to determine eligibility and priority for services (e.g., name, means of contact, and reason for application) and is available to complete the assessment process.

Move to Status 10 or close in Status 08

STATUS 04 – WAITING LIST

During an Order of Selection, the eligible individual does not meet the current priority category for services and is placed on a Waiting List.

Move to Status 10 or close in Status 38

STATUS 06 – TRIAL WORK EXPERIENCES or EXTENDED EVALUATION

The individual may be incapable of benefiting from services in terms of an employment outcome due to the severity of the disability. Trial work experiences or, in limited circumstances, extended evaluation may be provided for the purpose of determining eligibility or ineligibility.

Move to Status 10 or close in Status 08

STATUS 08 – CLOSED AFTER APPLICATION SUBMITTED

The applicant's record of services is closed before eligibility has been determined, or the applicant is determined ineligible.

Close from Status 02 or 06

STATUS 10 – ELIGIBLE

The individual meets all eligibility determination requirements. S/he has a physical or mental impairment that constitutes or results in a substantial impediment to employment, and requires vocational rehabilitation services. SSI recipients and SSDI beneficiaries are presumed to meet eligibility criteria, provided they intend to achieve an appropriate employment outcome. The individual is presumed able to benefit from services, unless the presumption is overcome by clear and convincing evidence through the use of trial work experiences or extended evaluation.

Move to Status 04, 14, 16, 18 or close in Status 30

STATUS 12 – INDIVIDUALIZED PLAN FOR EMPLOYMENT (IPE) COMPLETED: NO SERVICES PROVIDED

This status is automatically entered into FCS when the case is moved to Individualized Plan for Employment Status 14, 16, or 18.

STATUS 14 – INDIVIDUALIZED PLAN FOR EMPLOYMENT (IPE): COUNSELING AND GUIDANCE

The client primarily requires counseling, guidance and placement services to prepare for an employment outcome, and a plan is written.

Move to Status 20, 22, 24 or close in Status 28

STATUS 16 – INDIVIDUALIZED PLAN FOR EMPLOYMENT: PHYSICAL/MENTAL RESTORATION

The client primarily requires the provision or arrangement of physical or mental restoration services to prepare for an employment outcome, and a plan is written.

Move to Status 20, 22, 24 or close in Status 28

(Def. of VR Status Codes, cont.)

STATUS 18 – INDIVIDUALIZED PLAN FOR EMPLOYMENT: TRAINING

The client primarily requires provision of academic, vocational, personal/social adjustment or other training services to prepare for an employment outcome, and a plan is written.

Move to Status 20, 22, 24 or close in Status 28

STATUS 20 – READY FOR EMPLOYMENT

Planned services are completed and the client is ready for employment.

Move to Status 22, 24 or close in Status 28

STATUS 22 – EMPLOYED

The client has begun employment. **Move to Status 14, 16, 18, 20, 24 or close in Status 26 or 28**

STATUS 24 – SERVICES INTERRUPTED

The client is unable to participate in the IPE due to circumstances beyond his or her control. Planned services are interrupted for a period of time and there is a clear plan to resume services within a specified period of time.

Move to Status 14, 16, 18, 20, 22 or close in Status 28

STATUS 26 – CLOSED-EMPLOYMENT OUTCOME ACHIEVED

The client has entered into and retained full- or part-time competitive, supported, or other appropriate employment. Through an IPE, DOR services have been provided which contributed to the achievement of an employment outcome in the most integrated setting possible, and consistent with the client's unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice. Pay is at least the minimum, but not less than customary, wage/level of benefits paid to persons without disabilities who are performing similar work for the same employer. The employment outcome has been maintained for at least 90 days, the client is performing well, and post-employment needs are reassessed. See Supported Employment Manual for supported employment closures, or refer to CCR for homemaker or self-employment closures.

Close from Status 22

STATUS 28 – CLOSED-EMPLOYMENT OUTCOME NOT ACHIEVED (IPE SERVICES)

The client has been provided services through an IPE, but is not expected to achieve an employment outcome and/or can no longer benefit from services.

Close from Status 14, 16, 18, 22, 24

STATUS 30 – CLOSED- EMPLOYMENT OUTCOME NOT ACHIEVED (NO SERVICES)

Individual has been determined eligible but does not use planned services. **Close from Status 10**

STATUS 38 – CLOSED FROM WAITING LIST

The eligible individual is on a Waiting List during an Order of Selection, but will not advance to a service status.

Close from Status 04

Diversity

1. What is diversity?
 - Race, ethnicity, gender, religion, age, geography, culture, sexual preference, disability, among others
2. What are underserved or un-served populations?
3. How can cultural differences impact the mentoring relationship?

Communication

1. Rules of Communication

- Make your communication positive
- Be clear and specific
- Recognize that each individual sees things from a different perspective
- Be open and honest about your feelings
- Accept your mentee's feelings and try to understand them
- Be supportive and accepting
- Do not preach or lecture
- Learn to listen
- Maintain eye contact
- Allow time for your mentee to talk without interruption
- Get feedback to ensure you are understood
- Ask questions when you do not understand
- Set examples rather than giving advice

2. Setting Boundaries

- Boundaries are important in helping youth feel safe and protected. Boundary setting is important so that each person in a mentoring relationship is clear about his/her role. They help to establish and nurture trust in a relationship.
- Common areas where boundaries are needed include:
 - Time
 - Money
 - Meeting places
 - Self-disclosure
 - Working with parents
- It is important that mentors remember that the relationship is between them and the mentee – not the parents or other siblings.
- Extending this relationship to other family members usually jeopardizes the relationship.
- Regardless, mentors (and program managers) need to be very careful never to criticize the mentee's family, or otherwise comment on any personal feelings they may develop about the family.
- Advise mentors not to get caught up in an unhealthy cycle by becoming involved in the family's problems. This will lead a mentor to feeling used and it will create unrealistic expectations on behalf of the part of the parent. Most importantly, it will take the focus away from the youth.
- It is not the mentor's responsibility to be the family's babysitter or to give the parent a "break."
- If the parent needs help, suggest they contact the office.

(Communication, continued)

3. Relationship Building

- Discussion of the ten features of successful mentors attitudes and style that will help in establishing and maintaining the friendship:
 - Be a role model,
 - Have realistic goals and expectations,
 - Have fun together,
 - Give your mentee voice and choice in deciding activities,
 - Be positive,
 - Let the mentee have much control over what is talked about and how it is talked about,
 - Listen,
 - Respect the trust the mentee places in you,
 - Remember that your relationship is with the youth and not the youth's parent, and
 - Remember that you are responsible for building the relationship.
- Stages in Mentor-Mentee Relationship
 - The mentor-mentee relationship typically goes through three stages:
 - Developing rapport and building trust,
 - Setting and reaching goal(s), and
 - Bringing closure to the relationship.

Self-Determination

1. Self-determination is the right that every human should have to make decisions for his/herself.
 - A mentor's job is to help the mentee develop these decision-making skills and so they can learn to make their own choices.
 - The idea is to process with the youth so that they understand what the implications might be of any particular course of action, and to help them discover what is truly important to them.
 - This process is important to the mentoring relationship as it communicates respect and trust; it is also important to the mentee's development in that it builds healthy decision-making skills.
 - These concerns should take precedence over a focus on changing behavior or influencing the youth's course of action.

2. Some tips for promoting and respecting a mentee's right to self determination:
 - Focus on feelings and needs rather than jumping to problem solving
 - When an issue has been talked about, ask, "What do you think you would like to do about this situation," and "How would you like me to help?"
 - If you are not comfortable with what you are asked to do, ask yourself why before you decide whether to say so
 - Ask what alternative solutions would make him/her comfortable
 - Encourage critical thinking through questions and reflections
 - Use the words, "I don't know, what do you think?"
 - Once the mentor has successfully addressed the mentee's feelings and has processed with the mentee in a way that honors their need for self-determination, the mentor can further assist the mentee in locating resources and options.

Mentees

Mentee Screening

Mentee Screening Procedures

- Be referred by a DOR counselor.
- Complete written application packet.
- If under 18 parent/guardian completes Parent/Guardian Application packet.
- Obtain parent/guardian consent if under 18 years of age.
- Complete personal interview.

For those mentees who have a defined disability, reasonable accommodation costs may be provided on an individual basis for participation in mentoring services.

Documentation of the screening process will be maintained for each applicant and placed in confidential files.

Mentee Application Packet

Introduction

Program Information

The California Mentoring Initiative for Youth with Disabilities (CMI) is a new and exciting five (5)-year project that hopes to empower youth/young adults in the community to make positive life choices that will enable them to maximize their potential. The program uses adult volunteers to support and guide a youth/young adult for a minimum period of one (1) year. By becoming part of the network of adults and community members who care about the youth/young adult, the mentor can help the mentee develop and reach positive academic, career and personal goals.

Contact Information

If you have questions or need more information, please contact the following:

Please complete this application packet and return to:

Mentee Application

Mentee Information:

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail: _____

Date of Birth: / ____ / ____ Age: _____ Gender: Male Female

Ethnicity: White Hispanic African American Asian Other _____

Educational Placement: (Please check all that apply & include school name)

High School: _____

Community College: _____

Four year College/University: _____

Regional Occupational Program: _____

Trade/Technical School: _____

Adult Education School/Program: _____

Grade/Year: _____

If in High School please complete:

- General Education
- Special Day Class
- Designated Instructional Services (DIS)
- Resource Specialist Program (RSP)

Mentee Emergency Information Sheet
(To be in Mentor's possession during all mentoring sessions)

Mentee Name: _____ Date of Birth: _____

Home Address: _____

Home Phone: _____

Height: _____ Weight: _____

Hair Color: _____ Eye Color: _____

Ethnicity: _____

Communication Mode (e.g. ASL, speech, etc.): _____

Primary Language in Home: _____

Disability: _____

Specific Behavioral Characteristics, if any: _____

1) Emergency Contact Person: _____

Emergency Phone Numbers: _____

2) Emergency Contact Person: _____

Emergency Phone Numbers: _____

Medical Information:

Do you currently have any physical limitations/medical needs that we should be aware of? If yes, please explain. No Yes

Are there any accommodations that you need to ensure full access to the CMI Mentoring Program? If yes, please specify. No Yes

(Mentee Emergency Information Sheet, continued)

Do you have any allergies or adverse reactions to any medications? If yes, please explain.

No Yes _____

Are you currently using any medications? If yes, please list below. No Yes

Medication	Dosage
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Seizure Information: _____

Primary Care Physician: _____

Address: _____

Phone: _____ Medical Insurance Provider: _____

Policy #: _____ Group #: _____

Regional Center Counselor/Community Social Worker:

Other Comments and/or Information: _____

Mentee Certification & Signature Page

Please read the following before signing:

The California Mentoring Initiative for Youth with Disabilities appreciates your interest in participating in the program.

I understand that I must return this *completed* application packet and that any incomplete information may delay the processing of my application.

By signing below, I attest to the truthfulness of all information listed on this application.

Mentee Signature

Date

If mentee is under 18 years of age:

Parent/Guardian Signature

Date

IF NECESSARY, THE ABOVE HAS BEEN READ TO ME and/or SHOWN IN A MANNER THAT I UNDERSTAND AND WAS WITNESSED BY:

Signature

Date

Relationship to Applicant: _____

Parent/Guardian Referral Letter

(for mentees under 18 and their parent/guardian)

To the parent/guardian of _____:

_____ has been referred to participate in the California Mentoring Initiative for Youth with Disabilities program. This unique program matches a screened community volunteer to serve as a one-to-one mentor with youth/young adults referred by their Department of Rehabilitation Counselor.

This mentoring program requires up to eight (8) hours per month of mentoring to take place for a period of one (1) year. CMI will offer support and guidance for both mentor and mentee during the course of the program and will be as helpful as possible to ensure a successful relationship.

We hope that you will grant permission for _____ to participate in this program. Please complete this Mentee Application packet and return to us at the address shown on the front of the packet. Once we receive the completed application, you will be contacted to schedule an interview for you and _____. If you have any questions, please feel free to contact your Department of Rehabilitation counselor.

Thank you,

CMI Staff

(Parent/Guardian Information, continued)

5. Are you aware of any problems that your student is experiencing at home or school? If yes, please explain. No Yes

6. Describe your student's school performance:

Grades:

Excellent Good Fair Needs Improvement

Attendance:

Excellent Good Fair Needs Improvement

Homework:

Excellent Good Fair Needs Improvement

7. Does your student participate in activities with friends and in school and/or community activities? (If yes, check all that apply and specify). No Yes

School Sports Community Based Sports Other

School Activities Community Based Activities Other

Specify: _____

8. Has your youth/young adult experienced any recent traumatic events, such as a death in the family, divorce, etc.? If yes, please explain. No Yes

9. Please indicate any additional background information or characteristics that may be useful to know when making an appropriate mentor match for your student.

Parent/Guardian Consent & Signature Page
(for mentees under 18 and their parent/guardian)

Please read the following before signing:

The California Mentoring Initiative for Youth with Disabilities appreciates your interest in participating in the program.

I understand that this supplement along with the *completed* Mentee Application Packet must be returned to program staff and that any incomplete information may delay the processing of my child's application.

By signing below, I attest to the truthfulness of all information listed on this supplement and agree to my child's participation in the California Mentoring Initiative for Youth with Disabilities program.

Parent/Guardian Signature

Date

Mentee Interview

Applicant Name: _____ Date: _____

Interviewed by: _____

I will ask you a number of questions during this interview to help staff make the most appropriate mentor/mentee match. Some of the questions may be personal, and your answers will be kept confidential. However, some of the information on personal qualities, interests, etc. may be shared with a prospective mentor.

1. Why do you think you would like to have a mentor?
2. What type of person would you like to be matched?
3. Will you be able to fulfill the time commitments of the program—eight (8) hours per month with weekly contact for one (1) year?
4. Can you commit to communicating with program staff once a month about your relationship with your mentor?
5. What types of activities would you like to do with a mentor?
6. How would you describe yourself?
7. How do you think friends and family members would describe you?
8. How do you (or did you) do in school? Excellent Fair Poor
Explain:
9. Do you have any objectives or goals that a mentor might help you with?
10. Do you have any questions about the program?

Interviewer Comments:

Mentee Interest Survey

Name: _____ Date: _____

Please complete all of the following. This survey will help CMI know more about you and your interests and help to determine the most appropriate mentor match.

1. What times are most convenient to meet with your mentor? Check all that apply:

- Weekdays Lunchtime After School Evenings
 Weekends Other _____

2. Do you speak more than one language? If so, list languages:

3. What are your favorite subjects in school?

4. What is your employment goal?

5. If there was something about your disability you would want someone to know, what would it be?

6. If you could learn something new, what would it be?

7. What person(s) do you admire most? Why?

8. What are your concerns about the future?

9. Check all activities that interest you:

- | | | | |
|---------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Biking | <input type="checkbox"/> Camping | <input type="checkbox"/> Science | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Reading | <input type="checkbox"/> Hiking | <input type="checkbox"/> Boating | <input type="checkbox"/> Music |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Relaxation | <input type="checkbox"/> Golf | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Parks/Nature | <input type="checkbox"/> Movies | <input type="checkbox"/> Video Games | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Having Pets | <input type="checkbox"/> Board Games | <input type="checkbox"/> Shopping | <input type="checkbox"/> Automobiles |

10. List other areas/hobbies you like:

11. Do you participate in any school and/or community activities?

School Sports Community Based Sports Programming

School Activities Community Based Activities Other _____

Specify: _____

Mentee Information and Photo Release

Please read the following before signing.

I, _____ (print name), understand that to participate in CMI I will agree to the following:

I agree to allow CMI to use any photographs of me or comments I make while participating in the program or related surveys. I understand these images or comments may be used for promotional/marketing and/or publicity purposes.

Release of Information

Further, I expressly release the CMI program, its agents, employees, licensees and assigns from any and all claims which I have or may have for invasion of privacy, defamation or other such actions arising out of acquisition and reporting of this information. This release, and all permissions granted herein, is valid for one (1) year. I understand that the CMI Mentoring Program is authorized to release the following information:

Agents/persons authorized to receive information: CMI Staff and potential mentors

Signature

Date

If mentee is under 18 years of age:

Parent/Guardian Signature

Date

IF NECESSARY, THE ABOVE HAS BEEN READ TO ME and/or SHOWN IN A MANNER THAT I UNDERSTAND AND WAS WITNESSED BY:

Signature

Date

Relationship to Applicant: _____

Mentee Responsibility & Eligibility Agreement

As a mentee participating in CMI you, like your mentor, will have certain standards to uphold during your mentoring sessions. Because this program limits the number of mentees eligible for mentoring, each mentee must reflect a continued desire to remain an active participant. Those mentees who fail to live up to the assigned agreements may be removed from the program.

Mentee Contract

I agree to:

- Follow all guidelines set forth by CMI and the program manager.
- Have a positive attitude and be respectful to my mentor.
- Make a one (1)-year commitment with my mentor.
- Strive toward eight (8) hours per month mentoring activity with my mentor.
- Be on time for scheduled meetings or calls with my mentor, or inform my mentor in advance if I am unable to meet.
- Attempt to attend all scheduled mentor and/or CMI events.
- Complete any forms, surveys or questionnaires requested by CMI.
- Inform CMI manager of any difficulties or concerns that may arise with the mentor relationship.
- Notify my mentor and CMI manager of any changes in address & phone numbers.
- That transportation is my responsibility if I am 18 or older. If I am under 18, transportation is my parent/guardian's responsibility. I will request assistance if necessary to set up public or paratransit transportation to attend mentoring sessions and/or activities.
- Obtain parent/guardian permission for all meeting times at least three (3) days in advance if I am under 18 years of age.
- Regularly and openly communicate with the program manager as requested.
- Participate in a closure process when the mentoring match ends.

I understand that upon match closure, future contact with my mentor is a personal choice and mutual consensus and CMI is not responsible for further meetings or communication.

I agree to follow all the above stipulations of the program as well as other conditions instructed by the program manager at this time or in the future.

Mentee Signature

Date

If mentee is under 18 years of age:

Parent/Guardian Signature

Date

IF NECESSARY, THE ABOVE HAS BEEN READ TO ME and/or SHOWN IN A MANNER THAT I UNDERSTAND AND WAS WITNESSED BY:

Signature

Date

Relationship to Applicant: _____

Mentee File Checklist

Item	Date	Initials
DOR Information and Referral Form		
DOR Release Form (expires _____)		
Mentee Application Packet (completed):		
Application		
Emergency Information Sheet		
Certification/Signature Page		
Application Supplement (under 18):		
Parent/Guardian		
Parent/Guardian Information & Survey		
Consent/Signature Page		
Mentee Interview:		
Interest Survey		
Information and Photo Release		
Responsibility & Eligibility Agreement		
Training Completed		
Match Worksheet		
Emergency Information Sheet to Mentor		
Youth Participant Questionnaire		
Initial		
Six months		
One year		
Match Closure Form		
Mentee Exit Survey		

Mentee Orientation and Training

Mentee Orientation

(Overview of Mentoring –approximately 30 minutes)

WHAT IS MENTORING?

(2 min.)

Mentoring is a term used to describe a relationship when one individual gains personal growth and knowledge from a more experienced person by sharing their wisdom and guidance.

Ask: Think back to when you met your best friend. Did you ever think upon first meeting you would become so close? Think of a time you've been helped by someone else--a family member, a teacher, a counselor, or a friend.

WHY IS MENTORING IMPORTANT?

(10 min.)

Mentoring can be very successful and rewarding to both the mentor and mentee. Through mentoring, mentees (you) learn to live more independent lives and acquire the skills to become more successful. Mentoring provides persons with disabilities increased opportunities to explore careers and develop good work habits, social skills and attitudes necessary to obtain meaningful jobs. The benefits from mentoring may include but are not limited to:

- Working with a personal guide.
- Building self-esteem and confidence.
- Ability to learn from a role model.
- Developing life enrichment and personal fulfillment.
- Building important social skills.
- Helping to build career and professional growth.
- Exposure to new ideas and perspectives.
- Bridging the gap between classroom and 'real-world' learning.
- Providing support in reaching personal goals and objectives.
- Becoming more active.

Ask: Why would having a mentor be important to you? What do you want to accomplish that a mentor may help you with?)

Show CMI video of Gina Semenza

WHY IS MENTORING IMPORTANT FOR PERSONS WITH DISABILITIES?

Did you know?

(1 min.)

- There are over 100,000 youth with disabilities between 16-26 years of age in California.
- High school drop out rate for youth with disabilities is twice that of non-disabled peers.
- 12% of individuals with disabilities graduate from college compared to twice as many non-disabled adults.
- 30% of individuals with disabilities are employed compared to nearly 80% of non-disabled persons.

(Mentee Orientation, continued)

WHAT IS THE CALIFORNIA MENTORING INITIATIVE FOR YOUTH WITH DISABILITIES? (2 min.)

CMI is a long-term mentoring project designed to increase the competence and potential of students with disabilities. In this mentoring program, students must have a defined disability, participate in the state vocational rehabilitation system, and be between 16-26 years of age.

The purpose of this mentoring program is to stress the benefits of education, increase postsecondary schooling, and assist in employment outcomes for transition age youth with disabilities.

WHAT CAN MENTORING DO FOR ME? (5 min.)

Mentoring is a powerful tool that can positively impact a person's life, especially for those with a disability. Through mentoring, mentees can:

- Learn how to conquer disability-related barriers.
- Become more positive about their capabilities.
- Become more self-reliant.
- Increase social skills.
- Increase interest in going to college, working, and living independently.

Ask: What other ideas do you have that mentoring may help with?

Show new mentor/mentee CMI DVD video.

DOES MENTORING WORK? (3 min.)

Mentoring provides different results for different people. What one mentee feels is important may be different for someone else. Here are some examples of mentees sharing their own personal success stories:

“My mentor provided a lot of help with my social skills, and got me out of the house to go places. My mentor also helped me find summer work.” - Tim of San Jose

“I know it's early, but we can already notice the positive changes with the mentee. It's life changing!” - Christy of Los Gatos

“It's great knowing my mentor is there when I need her. She helps me in so many ways!” - Mallory of Saratoga

“I used to always be negative, but my mentor taught me to enjoy life, now I look at each day in a positive way!” - Dale of San Jose

Ask other mentees or a panel of mentees to share their personal stories.

ROLE OF THE MENTEE

(5 min.)

Mentoring is a two-way process. Both the mentor and mentee must communicate with one another for successful mentoring to take place.

A person takes on a lot of responsibility as a mentor. As a mentee, you will have responsibilities as well. You will want to make sure you consider these responsibilities before participating in the program.

- Complete mentee application form & mentee contracts.
- Follow all rules & guidelines outlined by your program coordinator.
- Be respectful of your mentor.
- Attend mentee trainings.
- Be on time to meet your mentor or let him/her know if you cannot make scheduled meetings.
- Respond to questionnaires, evaluations and requests for information.
- Notify your mentor & coordinator of any address/phone/email changes.
- Participate in a closure process.

Ask if everyone understands or if there are any questions to be answered.

WHAT WILL I DO WITH MY MENTOR?

(2 min.)

You will have many conversations and activities with your mentor. Once you get to know each other, you will decide what activities you both enjoy. Here are a few examples:

- Set your mentoring goals & objectives together.
- Go to a movie.
- Go to a library or bookstore together.
- Decide where you want to go to college.
- Talk about preparing for college.
- Find a summer job.
- Do a pretend job interview.
- Meet at a coffee shop or restaurant .
- Visit where your mentor works.

Ask mentees what other activities can they think of doing. Provide everyone a list of 50 mentoring activities.

Sample Agenda

(Approximately 2 hours for 10-15 mentees)

Sign-in & Opening Activity (icebreaker or other activity)	15 min
Welcome & Staff Introductions	5 min
Mentee Introductions	10 min
<i>If Mentee Manual is used, distribute and briefly review all training handouts</i>	5 min
What do a mentor & mentee do?	10 min
Relationship building	15 min
Break (snack or lunch)	15-30 min
Mentor/Mentee panel	15 min
Mentee Responsibility	10 min
Goal Setting	10 min
Q&A/Summarize/Evaluation forms	15 min

Mentee Training

(Approximately 2 hours for 10-15 mentees)

1. Sign-in & Opening Activity (icebreaker or other activity) 15 min
2. Welcome & Staff Introductions 5 min
3. Mentee Introductions 10 min
4. *If Mentee Manual is used, distribute and briefly review all training handouts* 5 min
5. What do a mentor & mentee do? 10 min
 - A mentor:
 - is a trusted guide
 - is someone to hang out with
 - is someone you can talk things over with when you don't want to talk to family, friends, others
 - is **NOT** a teacher, a parent, a psychiatrist, an ATM
 - Matched mentors & mentees:
 - spend about 8 hours a month together (in person/email/phone)
 - are matched for 1 year (can continue longer if desired)
 - work on self-esteem building and setting career, academic and personal goals
 - determine how to reach these goals
 - build a trusting, supportive relationship
 - Each mentor/mentee pair decides how they will spend their time together:
 - examples include dining out, movies, talking on the phone, shopping, sports, tutoring, emailing, filling out job applications, etc.
 - Activity:
 - "Have you ever had a mentor?" or other worksheet
6. Relationship building 15 min
 - The match process:
 - Program staff will find a mentor they think will work well with you.
 - They will tell each of you about the other.
 - If both of you agree, a meeting with you, the mentor and a program staff member is scheduled.
 - At the meeting you and your prospective mentor will:
 - meet and learn a little about each other
 - get to decide if you want to work together
 - schedule your first meeting if you decide to work together

- Getting to know each other:
 - Meeting and getting to know someone new can be uncomfortable. This is normal.
 - Think back to the first time you met your best friend. Did you know at that first moment that you would be so close? Probably not. The reason you didn't know it from the start is because it takes time for friendships to develop; they go through stages.
 - The first stage is a time when you get to know each other, a time to see what you have in common and what you like about each other. Is this a person you can trust?
 - After this beginning stage you begin to be more relaxed about a friendship. The relationship becomes less formal and more comfortable because you know about each other.
 - Your relationship with your mentor may be very much like this. At first it will seem new and unfamiliar. But if you are open to exploring who this person is and what you like about them, you will have a valuable friend. You will have the opportunity to do a lot of things together that will be rewarding for you and for your mentor.
 - Hand out and discuss "How to Spend an Hour with a Mentor" and "Things You Can Discuss with Your Mentor".

- Effective communication:
 - Listen well If you don't understand something, ask questions.
 - Body language: The way a person sits or stands often says as much or more than their words. Watch the way people act when they are speaking to another person. Many times you can tell a lot about the conversation even if you can't hear the words they are saying just by watching body language. Body language sends a message to the other person that you are or are not listening. Be aware of what your body language is saying to your mentor when you meet.
 - Answer with more than a "yes" or "no": These words don't say much and will make it more difficult to keep the conversation going. Be as clear and open with your mentor as is comfortable for you.
 - Have staff role-play examples; invite mentees to participate.

- Boundaries and confidentiality:
 - Relationships are built on trust and confidentiality. This will be true in your relationship with your mentor. We want you to feel free to share any information that you like with your mentor. Your mentor will know our policies on confidentiality and agrees to keep your information confidential.
 - There are limits to the confidentiality in the mentor/mentee relationship. You and your mentor should know and agree to these limits. If a mentee discloses information about suspected physical or sexual abuse, self-harm, or violence toward another person, the mentor **must** report this information to the program. This does not mean that you should not share this information with your mentor. Just know that, for your own welfare and the welfare of those affected by the situation, action must and will be taken.

7. Break (snack or lunch)

15-30 min

(Mentee Training, continued)

8. Mentor/Mentee panel 15 min
 - Mentors and mentees will discuss how their relationships work, how they spend their time together, etc.
 - Q & A session included

9. Mentee Responsibility 10 min
 - Communication
 - Return messages and missed calls to mentor and program staff (this includes phone and email)
 - Call your mentor in advance if you can't make a planned meeting or activity
 - Always be on time for meetings with your mentor
 - If being late is unavoidable, CALL and let your mentor know
 - Paperwork
 - Complete and return paperwork to program staff by date requested or within one week of receiving it
 - Questions or Problems
 - Contact program staff if you have questions.
 - Contact program staff right away if there is a problem.
 - Who do I contact?

10. Goal Setting 10 min
 - Defining a goal
 - Long-term (i.e., save to buy a house, become a professor) vs. short-term goals (i.e., get a GED, get driver's license)
 - Mentees will list three long-term and three short-term goals that they would like to work on with their mentors

11. Q&A/Summarize/Evaluation forms 15 min

Setting Goals for Mentoring

The Road to Success

Planning activities and pre-determining goals and objectives is key to successful long-term mentoring. **The California Mentoring Initiative for Youth with Disabilities** can assist in making those goals become a reality.

Think of basic things you would like to see happen with the help of your mentor, such as achieving better grades in school, receiving assistance with homework, or planning for college or a career. You may also consider what you'd like to change about yourself. For example, you may want to increase your self-esteem, to socialize more, or to be more active in your community.

What are some short-term goals you would like to set?

1) _____

2) _____

3) _____

What are some long-term goals you would like to set?

1) _____

2) _____

3) _____

Are there any other personal goals you would like to set?

1) _____

2) _____

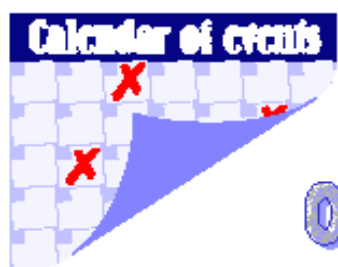
Now you and your mentor have some concrete goals that you can *both* work toward. Remember, your goals may be challenging, but they must also be realistic and attainable to achieve.

Things You Can Discuss With Your Mentor

As with all new relationships, you may find moments when things feel awkward until you have had a chance to find out what the other person is all about. After a while this will pass and the time you spend together will feel more natural and comfortable. Here are some questions to help start your mentoring relationship:

- What culture are you from?
- What are your favorite activities?
- What were you like when you were my age?
- What did you have to do to prepare for and get your job?
- What can this mentoring relationship do for me?
- What games do you like to play?
- What were your favorite subjects in school?
- What kind of (movies, books, music) do you like?
- How do you think I should handle this situation?
- What do you think are the most important skills to have for a career in _____ (add your area of interest)?
 - What do you think about (add current news event)?
 - How do I raise the subject of (add your subject) with my parents?
 - Do you know any funny stories?
 - What was your most important decision in life?
 - Where can I find out more about (add your area of interest)?
 - What would you do differently if you could?
 - What would you like to talk about?
 - Who mentored you?
 - How do you spend your time?
 - Add some questions of your own.

A Year's Worth of Mentoring Activities



A Year's Worth of Mentoring Activities

52 ideas, one for each week of the year:

(Cross them out as you do them!)

1. Set your mentoring goals together.
2. Make dinner together
3. Make popcorn and talk.
4. Go to a concert.
5. Tackle some homework.
6. Go out to dinner together
7. Go to a movie
8. Shoot some hoops.
9. Go to the Library together.
10. Just hang out.
11. Figure out how to program your VCR.
12. Learn about pop music.
13. Talk about life.
14. Give a tour of your current job.
15. Talk about your very first job.
16. Talk about planning a career.
17. Plan a career.
18. Get together with friends from work.
19. Visit a community college.
20. Visit a local technical school.
21. Talk about college.
22. Work on applications together.
23. Explore financial aid options.
24. Work on a resume.
25. Talk about dressing for success.
26. Do a pretend job interview.
27. Talk about how to look for a job.
28. Talk about where to find a job.
29. Find a summer job.
30. Set up a work internship.
31. Talk about making connections.
32. Talk about what it takes to get ahead.
33. Talk about health insurance.
34. Talk about taxes.
35. Talk about balancing work and life.
36. Talk about balancing a checkbook.
37. Talk about credit cards.
38. Talk about savings and investments.
39. Go bargain hunting.
40. Plan a week's worth of meals.
41. Go holiday shopping.
42. Write "thank you" notes.
43. Go to a house of worship.
44. Celebrate a friend's religious holiday.
45. Talk about relationships.
46. Talk about personal values.
47. Talk about the future.
48. Visit a convalescent hospital.
49. Discuss politics.
50. Share your culture and background.
51. Go hiking.
52. Do some volunteer work together.

Mentor/Mentee Matching

Mentor/Mentee Matching Guidelines

1. To begin the match process, CMI program managers will review the application, interview notes and interest survey information of both the mentee and mentor to determine match suitability between a mentor and mentee. The greatest weight will be placed on mentee preferences and needs. A match selection will be made using match suitability criteria, such as preferences of the mentor, mentee and/or parent/guardian, common interests, cultural considerations, geographical proximity and others. The matches for all participants under the age of 18 will be of the same sex.
2. Once a potential match is identified, and prior to contacting any of the prospective participants, the program manager must review the files of the potential mentor and mentee to ensure all screening procedures have been completed and both have met all the eligibility criteria. Once this is determined, the program manager fills out the Match Worksheet. A copy of the Match Worksheet will be placed in both the mentor and mentee files once a match is made.
3. The program manager then first contacts the prospective mentor, and without using last names, describes and provides information about the mentee to determine if there is interest by the mentor.
4. When the mentor expresses an interest in a particular mentee, the program manager then provides the mentee (if 18 or older), or the mentee's parent/guardian (if under 18), with a description and information about the prospective mentor.
5. If the mentee is under 18 years of age, the following will apply: If both the mentor and the parent/guardian agree, the program manager will then contact the mentee and describe the prospective mentor to them. The mentee is informed last so as to minimize disappointment if either the mentor and/or parent/guardian does not approve of the suggested match.
6. Once both parties tentatively agree to the match, a time is scheduled for an introductory meeting. The program manager facilitates this introductory meeting of the mentor, mentee and parent/guardian. The program manager should conduct the meeting by:
 - Facilitating introductions.
 - Having the mentor take the lead in talking about his/her interests, hobbies and why he/she wants to be a mentor, followed by the mentee doing the same.
 - Discussing appropriate mentoring activities and places to meet.
 - Asking each party if they are interested in moving forward with the match.
7. If anyone is uncertain, the parties may be given time to consider the match further.

(Mentor/Mentee Matching Guidelines, continued)

8. If all agree to move forward with the match, match Agreements must be completed and signed by all parties. Copies of all are given to each party.
9. The first mentor and mentee match meeting date and time should be confirmed. Telephone numbers and addresses can be exchanged at this time.
10. Once the match is made, program staff will add the mentor/mentee name to the log sheet of the mentee/mentor files and schedule the first follow-up call to each person within the first week following their first meeting date.
11. The program manager may request an information card and/or other health information.

Mentor/Mentee Match Worksheet
(To be completed by the program manager)

Prospective Match Participants:

Mentor: _____

Mentee: _____

Parent/Guardian: _____

Match Criteria

Why do you feel this match would be compatible and successful considering the following match criteria?

- Preferences of the mentor, mentee and/or parent/guardian
- Common interests
- Geographical proximity

Other reasons for compatibility:

Any areas of concern:

Comments:

Note: Place a copy of this completed form in both mentor and mentee files.

Match Closure

Match Closure Procedure

It is the policy of CMI that all mentors and mentees participate in closure procedures when their match ends. Closure is defined as the ending of a formal match. While no party is expected or encouraged to continue the relationship beyond the expected formal mentoring timeframe, matches may continue beyond the Agreement period for ongoing support or reasons of personal friendship. However, CMI will not be responsible for monitoring or supporting any matches continuing beyond the formal mentoring time period and will not be responsible or liable for any incidents that occur after the match has formally ended.

Closure can occur for any number of reasons including:

- The match time duration has ended.
- One or both participants do not want to continue.
- A change in a participant's life necessitates ending.
- An individual no longer meets the requirements of the program.

The mentoring match may end at the discretion of the mentor, mentee, parent/guardian or program manager. Based upon past performance, the reason for closure and the desire of each participant, the program manager will decide whether an individual will be reassigned to another match. If future mentoring is desired and agreed upon, a new match will be determined as outlined in the CMI Policies and Procedures manual.

CMI staff will follow match closure procedures as closely as possible given that each closure may differ due to its particular nature.

1. In general, the program manager will complete a Match Closure Form and guide all participants through the closure process. A copy of the Match Closure Form will be placed in both the mentor and mentee files.
2. All closures will be classified by the reason for closure. Closures are classified as follows:

Planned: A planned closure is one that is scheduled for a definite period of time and reaches the defined ending date. Common reasons for ending the mentor match include meeting the time commitment and achieving the goals of the match.

▪ **Extenuating:** Extenuating circumstances for closure are usually more sudden in nature and beyond control of the program participants, such as moving out of the area, health reasons or unexpected personal or family crisis.

▪ **Difficult:** A difficult closure is one due to relationship or behavioral difficulties. Such issues can be lack of cooperation, minimal contact, parental disapproval, lack of compatibility and/or violation of program policies.

(Match Closure Procedure, continued)

3. Every effort will be made to conduct a closure meeting with participating parties and program staff. The parent/guardian may attend if desired. The meeting, depending on the circumstances of the closure, will cover issues such as:
 - Overview of mentoring experience and activities.
 - Discussion on feelings about relationship ending.
 - Completion of Closure Exit Survey.
 - Discussion on possible future contact.
 - Distribution of written closure letters.
4. In the absence of meeting, program staff will attempt to contact all parties by phone to inform them the match is closing and the closing procedure. Closure letters and Exit Surveys will be mailed to the mentor, mentee and/or parent/guardian.
5. All participants will receive a closure letter stating the mentoring match has formally ended, and that any future contact will be left solely to the discretion of the participants.
6. Program staff will coordinate closure, conduct evaluations and assist in any way necessary to gather needed information and data.
7. Copies of closure letters, Exit Surveys and all related materials will be placed in both mentor and mentee files.
8. The files of the mentor and mentee will be either kept active or closed depending on the desire of the participants and at the discretion of the CMI program manager and staff.

Mentor Exit Survey

Thank you for serving as a mentor with CMI. Your efforts are greatly appreciated. In an effort to maintain our services and improve program effectiveness, your feedback is important. **Please complete the following survey and return to the program manager.**

Mentor: _____ Date: _____

Mentee: _____

Length of Match: _____ year(s) _____ months

1. Which of the following do you feel best describes your mentee relationship?

Very close Close Not close

2. Overall, how would you rate the mentoring sessions?

Very successful Successful
 Somewhat successful Not very successful

3. Why is your match ending?

Met ending period Mentee stopped attending Personal reasons
 Do not want to continue

4. Do you feel you received adequate support and supervision from program staff?

Yes No Please explain:

5. What aspects of CMI program did you enjoy most?

6. What aspects of CMI program did you enjoy least?

(Mentor Exit Survey, continued)

Mentor Name: _____

7. List those areas you feel were personally rewarding. Describe.

8. Do you feel you achieved what was intended? Yes No Explain:

9. What recommendations, if any, would you make for improving the program?

10. What was the most challenging part of mentoring?

11. Would you like to be matched with another mentee for mentoring?

Yes No Yes, but sometime in the future. When? _____

12. Do you know of other employees or friends that may be interested in mentoring? Please list names/phone numbers.

Other comments:

Signature: _____ Date: _____

Please return completed form to:

Match Closure Form

Mentor: _____

Mentee: _____

Match Start Date: _____ Closure Date: _____ Length: _____

Check appropriate boxes:

Planned	Mentor	Mentee
Completed 1 year match		
Other, Specify:		

Extenuating	Mentor	Mentee
Relocation		
Life Changes		
Time/Schedule Conflict		
Family/Personal/Health Issues		
Other, Specify:		

Difficult	Mentor	Mentee
Violation of Policy		
Behavioral Problems		
Lack of Cooperation with CMI		
Parent/Guardian Withdrew Mentee		
Lost Interest		
Other, Specify:		

Additional details concerning closure:

Recommend rematch? **Mentor** Yes No **Mentee** Yes No

Completed by: _____ Date: _____

Note: Place copy of completed form in both mentor and mentee files.