

**CITY OF AVENTURA
MENTORS PROGRAM
APPLICATION**



To recruit and establish a pool of volunteers to act as teacher helpers at area schools and to assist in the classroom campus and after school programs.

Name of Applicant: _____ Home Phone: _____
(Please Print)

Address: _____

Email Address: _____ Cell Phone: _____

Qualifications: _____
(Briefly describe how you can contribute as a volunteer mentor to a youngster)

Do you speak another language? Yes ___ No ___ If so, what? _____

Please indicate with a check mark what area you would be most interested in:

<input type="checkbox"/>	Teacher Helpers – Kindergarten and 1 st grade
<input type="checkbox"/>	Cafeteria Helpers
<input type="checkbox"/>	Hall Monitors
<input type="checkbox"/>	Library Helpers
<input type="checkbox"/>	After School Program
<input type="checkbox"/>	Special Events

Signature of Applicant

Date

**Fax or Mail completed application to:
Office of the City Manager
Aventura Government Center
19200 West Country Club Drive, Aventura, FL 33180
(305) 466-8910 (305) 466-8919 Fax**