Applicant Information

Full name:					Date:			
	Last	First		M.I.				
Address:					Phone:			
	Street address			Apt/Unit #				
					Email:			
	City		State	Zip Code				
Date Available): 	S.S. no:			Preferred Contact Me	ethod		
How did you h being a mento								
Military Se	rvice							
Branch:				From:			То:	
Rank at discha	arge:			Type of discharg	ge:			
Military Occup	pation(s):							
Type of Service	e:			Duty Stations:				
Deployments a	and/or Operations:							
Education								
High school:			Address:					
From:	То:	Did y	ou graduate?	Yes □ No	Diplon	na:		
College:			Address:					
From:	То:	Did y	ou graduate?	Yes □ No	Degre	e:		
Other:			Address:					
From:	To:	Did y	ou graduate?	Yes □ No	□ Degre	e:		

Character References

Full name:	Relationship:
Company:	Phone:
Address:	Email:
Full name:	Relationship:
Company:	Phone:
Address:	Email:
Full name:	Relationship:
Company:	Phone:
Address:	Email:
Previous Employment	
Company:	
Job title:	From: To:
Responsibilities:	
Company:	
Job title:	From: To:
Responsibilities:	
Company:	
Job title:	From: To:
Responsibilities:	
Availability	
	dnesday Thursday Friday Saturday
AM PM AM PM AM PM AM AM	

(Optional) For Purposes of Matching Ment	ors and N	Mentees	with similar b	packgrounds and interests:							
Do you speak any languages other than English?	Yes □	No □	Language(s) a proficiency:	and							
Are you a member of any social, community, or professional organizations?	Yes □	No □	Please list:								
Do you participate in any hobbies, sports, or other organized activities?	Yes □	No □	Please list:								
Do you identify with any cultural, spiritual, tribal, religious, or ethnic groups?	Yes □	No □	Please list:								
Why would you like to be a mentor with the Veterans Treatment Court?											
Are you willing to complete a background check?	Yes □	No □	If no, explain:								
Are you currently recovering from substance use or gambling addiction?	Yes □	No □	If yes, explain:								
Have you ever been convicted of a felony or misdemeanor criminal offense?	Yes □	No □	If yes, explain:								
Are you available to attend court on Wednesday from 12-2pm?	Yes □	No □	If no, explain:								
Are you interested in serving on the Veterans Treatment Court Philanthropy Steering Committee or Board?	Yes □	No □	If yes, _ explain: _								
Disclaimer and Signature											
I certify that my answers are true and commisleading information in this application Court Mentorship Program.	•		<u>-</u>	_							
Signature:			Da	ite:							

Completed form can be submitted by email to:

DC-VeteransCourt@dgcoks.gov