REACH Coordinator Resources



Sample Mentor Information Release

| l, | | , understand it v | vill be necessary for |
|--|--|--|--|
| << school/district name record, criminal history, | | _ | ound check regarding my driving |
| I authorize << school/district name >> to obtain any needed information regarding my driving record, legal/criminal history, character references, and employment from any state or federal agency, my employer, and personal references for the purposes of participating in a mentoring program. Further, provide permission for << school/district name >> to conduct the same investigation of my background in previous states in which I have resided. | | | |
| with a prospective ment Once a mentor/mentee | ee(s) and his/her pa match is determine mentee and parent, | arent(s)/guardian(s) to aid, my identity and any o | ously (without my name) shared d in determining a suitable match ther information known about me aid in facilitating a safe and |
| Signature | | | Date |
| Full Name | | | |
| Address | | _ City Sta | ate Zip |
| Date of Birth/_ | / | | |
| Social Security Number_ | | | |
| Current Driver's License | No | State: | |
| Please list any other citie | es, states, and dates | of residency during the | past 10 years. |
| City | State | From (m/year) | To (m/year) |
| City | State | From (m/year) | To (m/year) |
| City | State | From (m/year) | To (m/year) |
| City | | From (m/year) | To (m/year) |