

# JUMP for Kids Mentee Application Form

Applications are to be sent directly back to:

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# JUMP Mentee Application

(To be completed by the parent/guardian) (please print)

The following questions are asked to aid us in selecting the best mentor for your child. Thank you for all your assistance.

Child's Name: \_\_\_\_\_  
  first  middle  last  nickname

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: M F Race: \_\_\_\_\_

E-mail address \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Stepparent(s) or Significant Other names (if applicable)

Male: \_\_\_\_\_ Female: \_\_\_\_\_

Legal Guardian of child (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ E-mail address \_\_\_\_\_

Child comes from a family unit where parents are:  
Married Divorced Separated Single parent Widowed Co-habiting Other

Please list your child's brothers or sisters

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Will any of the brothers or sisters be participating in the JUMP for Kids program. Y or N.  
If the answer is yes, please put a check mark by the child's name above.

Has the child been matched through JUMP in the past? Yes or No

If yes, what was the name of your child's mentor: \_\_\_\_\_

What school does the child attend? \_\_\_\_\_ Grade: \_\_\_\_\_

What is your child's attitude toward school?

What are your child's interests? (church, clubs, activities, or organizations)

What is your child least interested in?

Would you have any objections if your child was matched up with a person from a different ethnic or religious background? Yes No

How would you best describe your child?  
(examples – shy, outgoing, moody, active, etc.)

Does your child have any past history with medical, physical or emotional conditions that JUMP should be aware of? Please list all current medications we should be aware of.

Has your child ever received counseling or therapy, or been involved with the police?

Are there any current problems or adjustments that JUMP should be aware of?

Are there any questions you would like to ask the JUMP for Kids Board of Directors? If so, please note a time that would be best for you and we will give you a call.

What are the best times of day and days of the week to reach you by phone?

Please rate your child in the following areas

Behavior – home	(poor)	1	2	3	4	5	(very good)
Behavior – school	(poor)	1	2	3	4	5	(very good)
Social skills – peers	(poor)	1	2	3	4	5	(very good)
Social Skills – others	(poor)	1	2	3	4	5	(very good)
Attitude	(poor)	1	2	3	4	5	(very good)
School interest	(poor)	1	2	3	4	5	(very good)
Helpfulness	(poor)	1	2	3	4	5	(very good)
Self Esteem	(poor)	1	2	3	4	5	(very good)

We want you to be aware that we try to make our matches as soon as possible. However, due to lack of mentors and our desire to match your child with someone who is compatible, this process does take some time. You will be contacted by JUMP for Kids as soon as we have a match.

### Safety Information

Though we hope that a situation of inappropriate contact will never be an issue for your child and their JUMP mentee, as a safeguard, please talk with your child about the following safety information. School counselors and/or the JUMP director will also cover this information with you and your child.

- A person's private parts are the parts of their body covered by a swimsuit and underwear.
- No one is allowed to touch your private parts, no matter what. It's not ok.
- No one is allowed to show you their own or anyone else's private parts, or touch you with their own private parts, no matter what. It's not ok.
- What to do if anyone tries to touch your private body parts, or show you their own or anyone else's private parts, or in any way makes you feel uncomfortable? Please immediately tell a parent/guardian, the JUMP director or your school counselor.

If at any point you have concerns about inappropriate contact between your child and anyone associated with their JUMP for Kids match, please contact the JUMP director or your child's school counselor.

## Permission

YES! I give approval to my child's participation in JUMP for Kids and pledge my support in helping the friendship between my child and his/her mentor grow. I know that I can contact the JUMP Director, or JUMP Board of Directors with my questions and I give permission for the same to contact me for the purpose of assisting in matching my child with a mentor and then assessing the progress of the match.

I realize that I may withdraw my child from the JUMP program at any time, but I agree to contact the JUMP Director or the JUMP Board of Directors as well as my child's mentor before doing so.

I relieve JUMP for Kids, JUMP staff, and the JUMP Board of Directors from any liability relating directly to the participation of my child or myself in any JUMP activities. Unless specifically revoked, this permission extends to all special JUMP events as well as activities of my child with his or her mentor.

I give my permission that information given in the application may be shared with my child's mentor, if necessary.

I have read the cover letter, application, and this permission slip, understand it and agree to all provisions.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

I authorize a JUMP mentor or JUMP for Kids Director to secure medical attention for my child should an emergency arise.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

I am aware that background checks have been run on my child's JUMP mentor only, not others in the mentor's home or with whom the mentor has a relationship. I will notify JUMP immediately if I have any concerns.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## Photo

If you have an extra picture of your child, we would appreciate having one for our files, however it is not a requirement of the program.

## JUMP for Kids Parent and Child Match Agreement

Dear Parent/Guardian,

We are very glad to be able to facilitate a friendship between your child and his or her mentor through the JUMP program.

Following is a list of responsibilities and agreements that JUMP for Kids believes will help create a successful match for child and mentor.

If you have any questions, please feel free to contact the JUMP Director or a member of the JUMP for Kids Board of Directors.

1. JUMP kids have an opportunity to learn how to be a friend. Please encourage your child to call his/her mentor regularly (but not too often) to set up weekly meetings and let the mentor know that the friendship is important to them!
2. Most mentors would like to feel appreciated. Please encourage your child to say THANK YOU after an outing and let the mentor know when he or she has had a good time.
3. Parents and children should be as prompt and dependable and avoid unnecessary cancellations. In the event of illness or other emergency, please notify the mentor as soon as possible.
4. If a problem arises over a suggested activity, cost of the activity, etc, please try, if at all possible, to resolve this through open discussion with the mentor. If you are unable or unwilling to discuss the problem with the mentor, please call the JUMP Director for assistance.
5. Please do not make requests of the mentor that are outside the purpose of the program (providing transportation for you or as a babysitter, etc.)
6. Please do not ask mentors to take siblings or other children not specifically assigned to the match.
7. Parents should make sure they are at home when the child is expected home after an activity. If this is not possible, make arrangements for an adult to be there and inform the mentor of this beforehand.
8. Mentors are encouraged to keep expenses to a minimum and not to feel obligated to spend money on their match. However, mentors may sometimes arrange activities that involve some expense. Some may be willing and able to pay for your child on these occasions: others may not.

Please be open and honest with the mentor about your willingness and ability to contribute on these occasions. Make sure your child understands that the mentor is there to be a friend and companion, not an ATM.

9. Since you have applied for a JUMP mentor for your child in the belief that it would be beneficial for him or her, please do not be tempted to withhold the relationship as a form of punishment when your child misbehaves. This puts the mentor in a very awkward position and puts a strain on the relationship. Other means of discipline or natural consequences are more appropriate than denying the friendship.
10. Mentors are not disciplinarians or substitute parents. However, they are allowed to exercise reasonable control of children when they are together. This does not include the use of any physical force or restraint. Mentors have been encouraged to discuss any discipline problems privately with you, or to contact the JUMP for Kids office for advice. Please help by talking with your child about appropriate behavior.
11. Please report any change in your family situation which affects the match to the JUMP office immediately. Also report any changes in your address or phone number. It is very important for us to be able to keep in touch with you through mailings and by phone.
12. The JUMP for Kids mentor should not be involved himself or asked to get involved in family matters that do not have a direct bearing on his or her relationship with the child.
13. The JUMP for Kids Board of Directors does not recommend overnight visits.
14. Please maintain one contact per month with JUMP staff. A staff person will phone or email to check in on the match, answer questions, and be sure things are going smoothly.
15. You will be notified via the JUMP for Kids newsletter of JUMP activities. Families are welcome to attend.

I have read and fully understand my responsibilities as a participant in the JUMP for Kids program. I promise to cooperate with my child's mentor, be open and honest in my communication with him or her and support and encourage the friendship to the best of my ability. I will call a JUMP staff person immediately if I have any concerns or if any problems arise in the match.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Media Release

I give permission for JUMP for Kids to photograph and video tape my child at any JUMP related activities. I understand that these photographs and footage may be used in whole or in part for the following publications.

First names only will be used.

Please initial all that you approve.

\_\_\_\_\_ local newspaper

\_\_\_\_\_ local radio

\_\_\_\_\_ brochures, displays, and JUMP power point

\_\_\_\_\_ Facebook

\_\_\_\_\_ YouTube

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_