

CREATING A BRIGHTER TOMORROW

Montgomery
Christian School
Mentorship
Program

WHEN: 30 MINUTES A MONTH (11:30-12:00)
CHOOSE ONE DAY THE 1ST FULL WEEK OF EACH MONTH
WHERE: MONTGOMERY CHRISTIAN SCHOOL

WHO: 3RD GRADE

KICKOFF MEETING: AUGUST 23 - 12:00-12:45 PM

CONTACT: PAM MCLEMORE -

PMCLEMORE@MONTGOMERYCHRISTIANSCHOOL.ORG

| Name _ | | Date |
|---------|---|--|
| Address | | |
| Email A | ddress | Phone |
| Mentor | ship Application | |
| Current | Issues | |
| auestio | ns about controversial issues. Your answers will be g | and values. As a volunteer, students may ask you specific uided by your personal convictions. We must know the ents, and that their views are founded on Biblical truth. |
| 1. | What are your beliefs and practices about the personsumed substances? | onal use of tobacco, alcohol, and any other privately |
| | | |
| 2. | | illegal drugs or controlled substances? If yes, please explain. |
| 3. | What are your beliefs regarding premarital sex, ho | mosexuality, and abortion? |
| 4. | Have you ever been convicted of a felony or a crim | ne involving moral turpitude? If yes, please explain. |
| 5. | Please comment how the Lord has led you toward | mentorship at Montgomery Christian School. |
| 6 | . Is there any aspect of your present life or social m | nedia that might embarrass this school? If yes, please explain. |
| | | II. |

Areas of Life Practice:

Please answer each of the questions below. This will enable us to do two things: become familiar with aspects of your life which will directly affect all of us; and learn of ways in which we may serve you as Christ makes you more into His image.

| 1. | While each of us develops spiritually over our lifetime, describe your spiritually over our lifetime, descrive your spiritual development, regarding Bible study, prayer life, and church activities, and any specific ways |
|----|---|
| | this maturity is shown in your life. |
| _ | |
| _ | |
| _ | |
| _ | |
| 2. | Describe two of your most important objectives in life and how you plan to reach those objectives. |
| | 4) |
| _ | |
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| _ | |
| _ | |
| 3 | . What specific gifts do you possess to equip you for mentoring students? |
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| | Jurat: I affirm the information given above is true to the best of my knowledge. |
| | Signature Date |



AUTHORIZATION

I HEREBY AUTHORIZE Montgomery Christian School obtain consumer reports and investigative consumer reports about me at any time after receipt of this Authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any person or entity, law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information to Employment Screening Services at 2700 Corporate Drive, Suite 100, Birmingham, Alabama 35242, 866-859-0143, www.es2.com.

The term background information includes, but is not limited to, employment history, reference checks, criminal and civil history information, motor vehicle records, moving violation reports, sex offender status information, credit reports, education verification, professional licensure verification, drug testing, and information related to my Social Security Number.

I acknowledge receipt of three separate documents entitled Disclosure of Procurement of Consumer Report, Disclosure of Procurement of Investigative Consumer Report, and a Summary of Your Rights under the Fair Credit Reporting Act, and I certify that I have read and understood all of those documents. I understand I can view ESS's Privacy Policy on its website at www.es2.com. I agree that a facsimile, electronic or photographic copy of this Authorization shall be as valid as the original.

| Signature of Applicant/Employee | Date | | |
|----------------------------------|------|--|--|
| | | | |
| Print Name of Applicant/Employee | | | |

Note to Company:

Maintain original authorization in personnel file.



CONSUMER INFORMATION SHEET

NOTE TO CLIENT: This is to be used for manual orders only. Clients using our Verocity Web Application or SwiftHire do not need to complete this page.

NOTE TO CONSUMER: The following is used only for the purpose of performing a background check. To view ESS's privacy policy, please go to www.es2.com/privacy-policy/

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|------------------------------------|----------------|----------------------|----------------------|-------------------------------|-------------------------|--|
| ist Name: | First N | √ame: | | Aiddle Name: | | |
| Date of Birth: Social Security Num | | ımber: <u>Driver</u> | | r's License Number and State: | | |
| Current Address: | | City | ۵ | State: | Zip Code: | |
| Previous Address (Past 7 Y | ears): | <u>City:</u> | × | State: | Zip Code: | |
| Previous Address (Past 7 \ | Years): | City: | | State: | Zip Code: | |
| Previous Address (Past 7 | Years): | City: | | State: | Zip Code: | |
| Degree obtained: | | Year Graduated: | Name of School. | | tv and State of School: | |
| Last Name Used at Time | of Graduation: | Other Aliases (C | other Names I Have B | een Known By | <u>):</u> | |