

The Coalition of Black Trade Unionists Mentorship Program
Application

Name: _____ Nickname: _____

Address: _____ City _____ State _____ Zip _____

Home Telephone: _____ Cell: _____

School: _____ Age: ____ Have Children? ____ age(s) ____

Best Subject: _____

Worst Subject: _____

Favorite Subject: _____

Hobbies: _____

1. What do you think is the most important issue facing our youth, today?

2. What are your goals for the future? How do you plan to achieve them?

3. Name three people whom you admire?

4. Why do you admire them?

5. List church affiliations, clubs, organization or other extracurricular activities that you participate in.

6. Do you have plan to attend College? _____

7. Are you interested in an apprenticeship program? _____

8. Do you need tutoring? _____

9. Would you be interested in Math A or B tutoring program? _____

10. Would you be interested in PSAT/SAT preparation course? _____

Signature

Date

Mail application to:
CBTU Mentorship program
c/o CBTU
P O Box 707
Buffalo, New York 14215

Date received _____ Initial(s) _____

Telephone contact _____

Interview date _____ Mentor assigned _____

