

Make a difference!

Mentor a child



The Youth Advisory Committee's **Big Buddy Little Buddy Program**

High school volunteers mentor children whose families live at the Greentree Shelter in Bethesda. Buddies spend three hours each week engaging in fun, positive activities and attend one special event each month.

- **Be a positive presence in a child's life!**
- **Learn valuable skills!**
- **Have fun!**
- **Earn Student Service Learning Hours!**

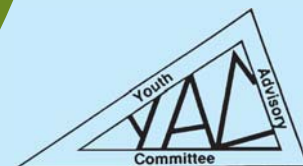
Homelessness touches the lives of thousands of children and families throughout Montgomery County. Teen mentors can make a difference!

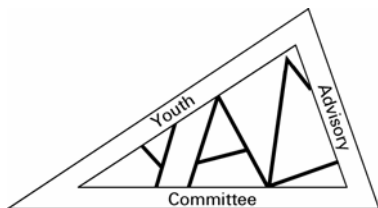
**Application Deadline:
September 26, 2008**

**For more information,
call 240.777.6985 or visit
www.montgomerycountymd.gov/rec**

Sponsored by Montgomery County Youth Advisory Committee, Department of Health and Human Services and the Department of Recreation.

Montgomery County
RECREATION
DEPARTMENT





**YOUTH ADVISORY COMMITTEE'S
BIG BUDDY LITTLE BUDDY
MENTORING PROGRAM
VOLUNTEER APPLICATION**

Date _____

Mr. or Ms. (Circle one) Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthdate: _____ Grade: _____ School: _____

Email Address: _____

Emergency Contact: _____ Phone: _____

Please list and describe your current extracurricular activities.

Please describe your previous volunteer experience(s):

Have you had any experience working or volunteering with children? If so, describe.

Please describe a situation which may demonstrate personal characteristics which make you an outstanding applicant:

PLEASE CHECK ONE



Session 1 October 2008-March 2009 _____

OR

Session II Oct 2008-May 2009 _____

(OVER)

Where did you learn about this program?

Why do you want to participate in a mentoring program?

How do you think that mentoring can make a difference in the life of a child who is experiencing homelessness?

Do you have a valid driver's license? ___ yes ___ no

What transportation is available to you? ___ car ___ bus

Additional information you wish to give:

REFERENCES: Please list at least two people that know you know well and can attest to your character, skill and dependability.

Name: _____ Phone _____

Name: _____ Phone _____

Please return application to:

Valerie Graham
Teen Team
Department of Recreation
4010 Randolph Road
Silver Spring, MD 20902
240-777-6917

Application deadline - September 26th, 2008