



I am interested in serving as a mentor to a Virginia Beach City Public School student.

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers: (h) _____ (o) _____ (cell) _____

Email: _____

Your occupation: _____

Employer: _____

Preferred school or area: _____

Preferred grade level (check one) Elementary Middle High

Preferred gender (check one) Male Female

Special interests/talents/hobbies: _____

Preferred days of the week: _____

Times you are available: _____

Please list three references:

	Name	Address	Phone	Relationship to you
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Additional Information: _____

Please return this form to:
Melissa McQuarrie, Director, Office of Community Relations
Virginia Beach City Public Schools
2512 George Mason Drive
Virginia Beach, VA 23456
(757) 263-1936 • (757) 263-1009 (FAX)
Email: melissa.mcquarrie@vbschools.com