

Skateboarding for **SUCCESS**

After-school Program Mentor Application

Full name: _____ Age: _____

Address: _____

Email: _____

Home phone number: _____ Cell phone number: _____

OTHER QUESTIONS:

How many years have you been skateboarding? _____

Do you consider yourself a beginner, intermediate or advanced? _____

Do you own your own skateboard? _____ What about a helmet? _____

Do you attend college? What year are you in? _____ What is your Major? _____

What kind of grades do you get? (Circle one)

Mostly A's

Mostly B's

Mostly C's

Not doing too good

How classes of school do you miss in a typical year? (Circle one)

A few days

1 week

2 weeks

3 weeks or more

Are you employed? _____ If so where? _____

If not employed are you interested in help getting a job? _____

Do you have experience working with youth? _____

Do you have volunteer or leadership experience? _____

Please complete this form and give it to Stephanie Murdock in person, or drop off:

Todd Clary at the Roosevelt Recreation Center, 1221 W. 36th St. 21211

or mail it to: Stephanie Murdock, 1007 W. 37th St. Baltimore MD 21211

For more information please contact Stephanie Murdock at 410 916 5570 or stephmurdock@gmail.com