

VOLUNTARY MENTORSHIP APPLICATION

lowa PBS would like to thank you for applying for a voluntary mentorship. In order to be considered for an unpaid mentorship with lowa PBS, please provide us with the information below. Interested candidates should be aware that there are only two mentorships available; receipt of your application does not guarantee your selection for a position. Applicants must be at least 16 years old. If selected, you will be required to provide proof of age, which can be in the form of a Government ID or Birth Certificate. If selected, you will be required to provide your own transportation to and from lowa PBS, located at 6450 Corporate Drive, Johnston, IA 50131. Occasionally there will be assignments at off-site locations; we will provide transportation to these sites from the station.

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PERSONAL INFO	DRMATION		
LAST NAME	FIRST NAME	MIDDLE I	NAME or INITIAL
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STREET ADDRESS	CITY	S	STATE ZIP
DAYTIME PHONE	EVENING PHONE	EMAIL ADDRESS	
DOB	GENDER	RACE/ETI	HNICITY
ЭОВ	GENDER	RACE/ETI	HIVICITY
EDUCATION			
NAME AND ADDRESS O	F SCHOOL		CURRENT GRADE
REQUIREMENTS	S		
outlines your qu	h a one-page summary about you ualifications to be part of Iowa Pl ach a letter of support from a sch	BS's Mentorship Program.	•
SIGNATURE OF APPLICA	NT	-	
SIGNATURE OF PARENT	OR GUARDIAN	-	