

Please return via e-mail to:  
[dcarpenter@melrose.mec.edu](mailto:dcarpenter@melrose.mec.edu)  
no later than Aug 19<sup>th</sup>

c/o 360 Lynn Fells Parkway  
Melrose, MA 02176  
Telephone: 781-462-3271  
www.educationstations.com  
educationstations@melrose.mec.edu

## Education Stations

### Student Mentor Application

**Please press "insert" key/ enter your information in type-over mode & preserve formatting.**  
**PERSONAL INFORMATION**

Today's Date \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (Sept. 09) \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone number: home \_\_\_\_\_ cell \_\_\_\_\_

Email address: \_\_\_\_\_

Parents/Guardian(s) Names \_\_\_\_\_

Phone number: home \_\_\_\_\_ cell \_\_\_\_\_

Address (if different) \_\_\_\_\_  
\_\_\_\_\_

Elementary school you attended \_\_\_\_\_

City and State (if not Melrose) \_\_\_\_\_

Elementary school preference, i.e. Education Stations location where you *prefer* to work\*:

Hoover      Horace Mann Lincoln      Roosevelt      Winthrop

\*While all preferences cannot be granted, requests will be facilitated as possible.

Extracurricular activities (sports, arts, drama, volunteer work, etc):

Activity \_\_\_\_\_

Activity \_\_\_\_\_

Location \_\_\_\_\_

Location \_\_\_\_\_

Time of year \_\_\_\_\_

Time of year \_\_\_\_\_

Hours per week \_\_\_\_\_

Hours per week \_\_\_\_\_

Name \_\_\_\_\_

Activity \_\_\_\_\_

Activity \_\_\_\_\_

Location \_\_\_\_\_

Location \_\_\_\_\_

Time of year \_\_\_\_\_

Time of year \_\_\_\_\_

Hours per week \_\_\_\_\_

Hours per week \_\_\_\_\_

**QUESTIONS**

Why are you interested in working with Education Stations?

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What makes you a good candidate for this position? More specifically, what qualities do you have that would make you a good student mentor? How would you add to the educational, recreational, social and cooperative atmosphere of Education Stations?

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What special skills and talents do you possess that you can bring to Education Stations (e.g. languages, athletic talents, artistic abilities, etc.)

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Do you have any prior experience working with elementary age students?

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What kind of reputation would you say you have with teachers in your school?

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Name \_\_\_\_\_

How would your friends describe you?

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**WORK EXPERIENCE**

• Company/Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_ Phone number \_\_\_\_\_  
Email address \_\_\_\_\_ Dates/Term employed \_\_\_\_\_  
Job title and responsibilities \_\_\_\_\_

• Company/Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_ Phone number \_\_\_\_\_  
Email address \_\_\_\_\_ Dates/Term employed \_\_\_\_\_  
Job title and responsibilities \_\_\_\_\_

Please mark **JUST ONE** box below each week day to indicate your availability.

	Mondays	Tuesdays	Wednesdays	Thursdays	Fridays
2:30-4:45					
2:30-6:00					
UNAVAILABLE					

Please provide three character references

	Reference #1	Reference #2	Reference #3
Name			
Relationship			
Phone Number			
Email Address			

Name \_\_\_\_\_

How long known			

Please list any additional information you would like us to know about you: \_\_\_\_\_

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**NOTE:** Applications for Education Stations student mentor positions will be verified by Mr. Joseph Dillon, Melrose High School Principal. Thank you for applying!

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_