



Dreamfar High School Marathon Volunteer Mentor Application

Contact Information		
First/Last Name:		
Email:		
Address:		
City:		
State:		
Zip Code:		
Home Phone:		
Cell Phone:		
Work Phone:		
Emergency Contact:		
Emergency Contact Phone:		
Relation to Emergency Contact:		
Profile		
Referred By:		
Birth Date:		
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Race: (optional)	<input type="checkbox"/> African American <input type="checkbox"/> American Indian/Native American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Multi- Racial <input type="checkbox"/> Other
Why do you want to be a Dreamfar mentor?		

Clothing Sizes:

Indicate your male OR female size AND your unisex size which tends to be close to the same size as male clothing.

T-Shirt (Male):

- Small
 Medium
 Large
 Extra Large

T-Shirt (Female):

- Small
 Medium
 Large
 Extra Large

T-Shirt (Unisex):

- Small
 Medium
 Large
 Extra Large

Education

Highest level of education received:

- H.S. Diploma or Equivalent
 Associates Degree
 Bachelors Degree
 Masters Degree
 Terminal Degree (M.D., J.D., etc.)
 Other:

School Name:

Degree Received:

Employment: Please attach a copy of your resume to this application.

Occupational Field:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Business | <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Education | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Government | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Health Care | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Other: |

Company Name:

Job Position:

Does your company have a matching gifts program?

- Yes No

Reference Checks: Please provide 3 non-family references

Reference 1:

Name:
 Phone:
 Email:
 Relationship:

Reference 2:

Name:
 Phone:
 Email:
 Relationship:

Reference 3:

Name:
 Phone:
 Email:
 Relationship:

DREAMFAR

HIGH SCHOOL MARATHON

Running Experience: You DO NOT need to have any running experience to volunteer for this program.

What is your minute/mile pace for a marathon?

<input type="checkbox"/> 7-8 minute/mile	<input type="checkbox"/> 12-13 minute/mile
<input type="checkbox"/> 8-9 minute/mile	<input type="checkbox"/> 13-14 minute/mile
<input type="checkbox"/> 9-10 minute/mile	<input type="checkbox"/> 14-15 minute/mile
<input type="checkbox"/> 10-11 minute/mile	<input type="checkbox"/> Unknown
<input type="checkbox"/> 11-12 minute mile	<input type="checkbox"/> Other:

Are you available to meet on Saturdays for a full Dreamfar season (November-June)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you available to run the Providence Marathon on Sunday May 1, 2016?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you completed a marathon before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered “yes” above, please indicate your finishing time.		

Please return to Kate Russell, Mentoring Specialist:

- Scan and email to kate@dreamfarhsm.org
- Fax to Kate Russell at 617.527.9994
- Mail to Dreamfar High School Marathon, 27 Scotney Rd. Chestnut Hill, MA 02467