POLICIES AND PROCEDURES MANUAL

P.R.I.D.E.

of Halifax Community College
Preparing Men for Intellectual, Academic, & Educational Success

MENTORING PROGRAM
POLICY AND PROCEDURE MANUAL:  
**P.R.I.D.E.**  
MENTORING PROGRAM

Table of Contents

SECTION 1. ORGANIZATIONAL BACKGROUND......................... 3

SECTION 2. PROGRAM POLICIES........................................ 9

Recruitment Policy.......................................................... 9
Inquiry Policy........................................................................ 9
Eligibility Policy................................................................. 10
Screening Policy................................................................... 16
Training Policy....................................................................... 17
Matching Policy...................................................................... 17
Match Support and Supervision Policy................................. 18
Recognition Policy.............................................................. 18
Record-Keeping Policy......................................................... 19
Confidentiality Policy.......................................................... 20
Transportation Policy........................................................... 21
Overnight Visit and Out-of-Town Travel Policy..................... 22
Mandatory Reporting of Child Abuse and Neglect Policy......... 23
Use of Alcohol, Drugs, Tobacco, and Firearms Policy............ 24
Unacceptable Behavior Policy................................................. 25
Closure Policy....................................................................... 26
Evaluation Policy................................................................. 27

SECTION 3. PROGRAM PROCEDURES .................................. 28

Recruitment Procedure......................................................... 28
Inquiry Procedure............................................................... 34
Mentor Screening Procedure................................................ 38
Mentee Screening Procedure................................................ 53
Training Procedure............................................................. 72
Matching Procedure............................................................ 79
Match Support and Supervision Procedure.......................... 85
Recognition Procedure........................................................ 90
Mandatory Reporting of Child Abuse and Neglect Procedure... 92
Closure Procedure............................................................... 95
Evaluation Procedure.......................................................... 102
P.R.I.D.E Mentoring Program Policy and Procedure Manual

SECTION 1. ORGANIZATIONAL BACKGROUND

P.R.I.D.E. Mentoring PROGRAM

History

The Halifax Community College’s (HCC’s) Freedom to Learn Initiative began in October 2008 as the brain child of Dr. Ervin Griffin Sr., President of Halifax Community College, and Tom Schwartz, V. P. of Institutional Advancement. The Freedom To Learn Initiative is an academic and student success initiative that serves HCC’s male students. It was designed to increase academic performance, retention, graduation /transfer rates, and to decrease student drop-out rates (including those students who drop-out for financial reasons. In February 2009, Program Director, Daniel Lovett, change the name to P.R.I.D.E. (PReparing men for I ntellectual, acaDemic & E ducational Success) and the program is now well known on campus as The P.R.I.D.E of Halifax Community College.

P.R.I.D.E. is a federally funded program whose services include: academic advising, financial aid counseling, tutorial assistance, peer/career mentoring, cultural/educational enrichment and assistance with transferring to four-year colleges/universities. P.R.I.D.E. fosters one-on-one partnerships between students and learning coaches, along with HCC faculty, staff and administrators. There are two professional development components: 1) The student development component provides opportunities for men to participate in paid, on-campus and community-based internships, college and business visits, and professional conferences. 2) The faculty development component provides financial support and training opportunities designed to enhance teaching and learning effectiveness strategies that enhance student performance, success, retention, and graduation rates.

P.R.I.D.E has served over 275 men enrolled at Halifax Community College and look forward to serving many more through a variety of resources and programs.
P.R.I.D.E MENTORING PROGRAM

Mission Statement

The mission of the P.R.I.D.E Mentoring Program is to empower Halifax Community College male students to make positive life choices that enable them to maximize their personal and academic potential along with social responsibilities.

P.R.I.D.E. MENTORING PROGRAM

Vision Statement

P.R.I.D.E Mentor Program envisions Halifax Community College male students experiencing healthy one-to-one and/or group relationships, with the support of the community and HCC, which in turn allows each of them to develop into independent and self-assured men who are capable of making informed, responsible decisions as involved members in society.
P.R.I.D.E Mentoring Program Policy and Procedure Manual

SECTION 1. ORGANIZATIONAL BACKGROUND

P.R.I.D.E MENTORING PROGRAM
Organizational Chart

Dr. Ervin Griffin

Tom Schwartz

P.R.I.D.E. Program Director

Steering Committee

Learning Coach

Learning Coach

Learning Coach

Administrative Assistant

Community Advisory Committee

Math Tutor

English Tutor
P.R.I.D.E MENTORING PROGRAM

Learning Coach
Job Description

The P.R.I.D.E. Mentoring Program is located on the Campus of Halifax Community College and strives to improve the quality of life for HCC male students by preparing them for responsible citizenship and success; we will help transform our educational environment and strengthen the social and economic development in our communities.

The Learning Coaches oversee the development and implementation of the various mentor components within P.R.I.D.E. Mentoring Program i.e.... A) Academic and Social mentorship, B) Professional and Leadership Development Mentorship, C) One on One and Group mentorship and D) Community and Service Mentorship.

Learning Coaches develop individualized college success plans with the HCC student and monitors their performance and progress from initial enrollment through graduation and/or transfer to a four-year college.

The Learning Coaches ensures program quality and performance related to recruiting, screening, matching, monitoring, and closing the relationship with the mentor and the student, and communicates with the mentor, parent/guardian, business, school, community organization, and student throughout the relationship.

Reporting to the P.R.I.D.E. Program Director, the Learning Coaches will carry out the responsibilities of the position as defined below:

Duties:

- Create and oversee implementation of an ongoing academic, professional, personal and community oriented mentor recruitment plan, including development of an annual recruitment and quarterly activity plan, development and distribution of program marketing materials, presentations to targeted organizations, and ensuring a presence at key community events, etc..
- Perform and oversee participant screening, training, matching, support and supervision, recognition, and closure activities.
- Develop and manage relationships with metro area schools, businesses, civic organizations, training centers, and community-based organizations.
- Oversee inquiry and orientation process to ensure excellent public relations and customer service.
- Manage the planning and implementation of mentor/mentee group events.
- Plan and implement recognition activities for program participants.
- Maintain and update the program’s policy and procedure manual as needed.
- Oversee program evaluation activities.
- Attend regional/national conferences to increase knowledge of mentoring program and best practices.
- Complete other duties and activities as needed.
Memorandum of Understanding

A Memorandum of Understanding (MOU) is a partnership agreement with other institutions that will serve and/or allow P.R.I.D.E. to serve as a mentor, mentee, or other resource.

_____ will:
- Identify, solicit, and recruit volunteer mentor applicants
- Manage programmatic activities including but not limited to development of policies and procedures, fund development, and case management
- Oversee all operational activities including screening, training, matching, support and supervision, recognition, and closure procedures
- Coordinate one-to-one and/or group mentor and mentee matching to meet the goal of _____ new matches per year
- Manage all fiscal requirements including fund development, budget management, and fiscal planning
- Provide evaluation summaries of the project to all partners

_____ will:
- Provide on-site coordination, an adequate project site, office space, and facility amenities
- Identify appropriate participants at ______ for referral
- Advise on the academic needs of participating student
- Assist in providing program evaluation data for participating students including grades, attendance records, advisor, supervisor, instructor reports
- Provide a contact person
- Cooperate to the fullest extent possible with Mentor Program Learning Coach
P.R.I.D.E., Halifax Community College, and ______ will hold all information confidential regarding participants and release such information only with signed consent or in cooperation with law enforcement investigations in compliance with local and state laws and statutes.

In witness whereof, the parties hereto have caused this MOU to be executed as of the day and year listed below.

<table>
<thead>
<tr>
<th>P.R.I.D.E Mentoring Program:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Title</td>
<td>Date</td>
</tr>
<tr>
<td>_________________________</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Halifax Community College</th>
</tr>
</thead>
<tbody>
<tr>
<td>_________________________</td>
</tr>
<tr>
<td>Name</td>
</tr>
<tr>
<td>_________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Institution’s Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________________</td>
</tr>
<tr>
<td>Name</td>
</tr>
<tr>
<td>___________________</td>
</tr>
</tbody>
</table>
### Recruitment Policy

**Steering Committee Approval Date:** __________  
**Revision Date:** __________

It is the policy of P.R.I.D.E. Mentoring Program that there are ongoing recruitment activities for new mentors and mentees. As such, an Annual Recruitment Plan will be developed and will include recruitment goals, strategies to achieve those goals, an annual timeline, and budgetary implications. This plan will be kept current with any ongoing adjustments. Additionally, a detailed Quarterly Recruitment Activity Plan will outline specific tasks and activities.

The Learning Coaches assumes lead responsibility for the recruitment of new mentors and mentees. Other P.R.I.D.E. Mentoring Program Director, the Steering Committee and other staff members will support the Learning Coaches in these activities as required.

### Inquiry Policy

**Steering Committee Approval Date:** __________  
**Revision Date:** __________

It is the policy of the P.R.I.D.E. Mentoring Program that all inquiries regarding participation in the mentoring program are responded to within 3 business days.

Superb public relations and customer service must be provided to all potential program participants at all times, from first contact throughout the screening process and beyond, regardless of the final screening outcome. All P.R.I.D.E Program staff members handling calls from prospective mentors must be patient, courteous, and respectful in all interactions.

A system, including backup support and staff training, must be in place to ensure this policy is enforced.

Confidentiality for all potential participants will be upheld from this initial point of contact forward.
P.R.I.D.E Mentoring Program POLICY

Mentor Eligibility Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E Mentoring Program that each participant must meet the defined eligibility criteria. The P.R.I.D.E. Program staff should be knowledgeable of and understand all eligibility criteria required for mentor and mentee participation in the program.

Extemating circumstances may be reviewed at the discretion of the Mentor Programs Learning Coaches and acceptance may then be allowed with the written approval of the P.R.I.D.E. Program Director and representative of the Steering Committee when all eligibility requirements are not clearly met. These instances are expected to be rare.

One on One and Group Mentor Eligibility Requirements:

- Be at least 25 years of age
- Reside in the Roanoke Rapids Metropolitan area
- Be willing to adhere to all P.R.I.D.E Mentoring Program policies and procedures
- Agree to a one-year commitment to the program
- Commit to communicate a minimum of 4 hours a month with the mentee
- Complete the screening procedure
- Agree to attend mentor trainings as required
- Be willing to communicate regularly with the learning coach and submit monthly meeting and activity information
- Have an acceptable criminal history record
- Have never been convicted of child abuse or molestation
- Not be a user of illicit drugs
- Not use alcohol or controlled substances in an excessive or inappropriate manner
Not be currently in treatment for substance abuse.
- Not currently be under treatment for a mental disorder or have been hospitalized for a mental disorder in the past three years
- Not have falsified information during the course of the screening process

One on One and Group Mentee Eligibility Requirements:
- Be a male enrolled in at Halifax Community College
- Be a participant in the P.R.I.D.E. Program
- Demonstrate a desire to participate in the mentor program and be willing to abide by all P.R.I.D.E Mentoring Program policies and procedures
- Agree to a one-year commitment to the program
- Commit to communicating a minimum of 4 hours a month with the mentor
- Complete screening procedure
- Agree to attend mentee trainings as required
- Be willing to communicate regularly with the learning coach and discuss monthly meeting and activity information
Mentor Eligibility Policy

Professional (Internship/Workshop) Mentor Eligibility Requirements:

The P.R.I.D.E. internship/workshop mentoring program seeks to help students develop a good work ethic before they enter the real workforce. Each student participating is enrolled at Halifax Community College (HCC) and is a part of the P.R.I.D.E. Male Mentoring Program. Students design their own work schedules that compliment their academic schedule. The combination of both a work and academic schedule provide for a rigorous collegiate experience, but prepares the students with the skills necessary to be competitive in the workforce.

The P.R.I.D.E. program offers off-campus work opportunities for men in the program. These work opportunities build upon the work skills obtained through the on-campus or workshop experience that students should complete before working off site. Currently, the P.R.I.D.E. program has been able to partner with a number of businesses, governmental and non-profit agencies. If you are an established business in the metro area, you may qualify to be a sponsor for our Professional Mentor Program.

PARTICIPATION AS AN INTERNSHIP SPONSOR

P.R.I.D.E. provides funding for student placements at a rate of a maximum of 15 hours per week at $7.25 per hour. (therefore, sponsoring a P.R.I.D.E. intern is not a cost for your organization)

This is a great way to obtain extra employees at your place of work, without any expense to you. Sponsor organization staff serve as mentors to a P.R.I.D.E. student, grooming them professionally.

An awesome way to “give back” to the community and train additional manpower for your industry or particular field of work.

An excellent opportunity to partner with Halifax Community College as it seeks to develop

WHO’S A SPONSOR?

Roanoke Valley Chamber of Commerce
Roanoke Rapids Housing Authority
Weldon City Schools
City of Roanoke Rapids Parks and Recreation Department
Roanoke Rapids Library
Capstone
Bright Smiles
Easter Seals
And more....
P.R.I.D.E Mentoring Program Policy and Procedure Manual

SECTION 2. PROGRAM POLICIES

P.R.I.D.E. Mentoring Program POLICY

Mentee Eligibility Policy

Professional (Internship/Workshop) Mentee Eligibility Requirements:

Curriculum Student, Diploma, Certification
- Currently enrolled as a student at Halifax Community College
- Maintain satisfactory academic progress and GPA at the end of each semester (standards set by Halifax Community College’s Office of Financial Aid see HCC Student Handbook page 50-51
- Demonstrate personal growth in the workplace (as defined by supervisor performance evaluation)
- Cannot exceed more than 3 absences (excused or unexcused) per semester (mobile phones call and texting cannot be used unless approved in writing by the supervisor)
- Maintain regularly scheduled meeting with your Learning Coach
- Participate in four PRIDE program activities per semester at minimum and other program activities
- Dress neatly while on campus
- Cannot drop/withdraw from more than 2 courses during a semester
- Refrain from use of inappropriate language and behavior
- Dress professionally/appropriately for the workplace. (Per supervisor discretion)
- Observe 3-Strike Rule (will result in immediate removal from the program).  
  Individuals repeating the same infractions 3 times (e.g., wearing head garments inside buildings, sagging pants, offensive shirts, reporting to work late, no-shows, etc.

GED Participants
- Currently enrolled as a student at Halifax Community College GED program
- Maintain satisfactory academic progress (Must commit a minimum of 15 hours per week to class)
- Must receive permission to participate for GED program director.
- Must receive satisfactory rating on each work component according to the performance plan
- Must have a performance/departure date for program exit
- Cannot exceed 3 class absences.

Academic Requirements & Performance
- Making satisfactory academic progress in GPA and credit hours
- Attend regularly scheduled PRIDE program meetings and activities
- Meet regularly with Learning Coach
- Present themselves respectfully, as good citizens and positive ambassadors for PRIDE and HCC
- Attend Class regularly
- Averages no more than one class drop/withdrawal each semester
P.R.I.D.E. Mentoring Program POLICY

Eligibility Policy School and Community Base Mentor

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E Mentoring Program that each participant meet the defined eligibility criteria. The P.R.I.D.E. Program staff should be knowledgeable of and understand all eligibility criteria required for mentor and mentee participation in the program.

When working with area schools and community organizations, P.R.I.D.E. adheres to the policy and procedures of that establishment. P.R.I.D.E.’s goal is to be a mentor and positive role model for the eligible students enrolled in their respective institution/establishment i.e.... elementary, middle, high school, community center. The P.R.I.D.E. participants will meet with eligible students at their school, supervised by a learning coach, for 1 hour a week.

P.R.I.D.E. Participants Volunteering for School Base Mentor

Eligibility Requirements:

- Be enrolled at Halifax Community College
- Be enrolled as a HCC P.R.I.D.E. participant.
- Be willing to adhere to all P.R.I.D.E Mentoring Program policies and procedures
- Agree to a full school year commitment to the program
- Be willing to spend 1 hour a week with a elementary, middle, or high school student at their school
- Complete the screening procedure
- Agree to attend mentor trainings as required
- Be willing to communicate and follow up on goals and task structured by the learning coach for the P.R.I.D.E. Mentor and student Mentee.
- Ride in P.R.I.D.E. van or use reliable transportation when meeting with students at their school on time.
- Have an acceptable criminal history
- Have never been accused, arrested, charged, or convicted of child abuse or molestation
- If the applicant has been convicted of a felony then they may be considered only after a period of demonstrated good behavior and an appropriate and corrective attitude regarding past behaviors.
- Not be a user of illicit drugs
Not be currently in treatment for substance abuse.
Not currently be under treatment for a mental disorder or have been hospitalized for a mental disorder in the past three years
Not have falsified information during the course of the screening process

**Schools and Community Organizations Eligibility Requirements:**

- Have a male student at your school in need of guidance
- Have a male student at your school with behavior &/or discipline issues
- Have a male student at your school with academic issues
- Have a male student who is withdrawn
- Agree to a one academic school year commitment to the program
- Commit to allowing your student to spend 1 hour a week with a P.R.I.D.E. mentor in an area large enough to be supervised by the learning coach.
- Complete the Memorandum of Understanding
Screening Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of P.R.I.D.E. Mentoring Program that each mentor and mentee applicant completes a screening procedure. All staff members must be trained and required to carefully follow the screening procedures.

At minimum, the following screening procedures are required for mentor and mentee applicants. Program staff must ensure that each applicant completes these established minimum screening procedures:

**Mentor Screening Procedures**
- Attend the mentor training
- Complete written application
- Child abuse registry, sexual offender registry.
- Provide three personal references
- Complete personal interview

**Mentee Screening Procedures**
- Attend the mentee training
- Complete written application
- Obtain parent/guardian consent (under 18, school/community base)
- Complete personal (mentee) interview

The decision to accept an applicant into the program will be based upon a final assessment done by the P.R.I.D.E. Mentoring Program staff at the completion of the mentor or mentee screening procedure. The Learning Coaches have final approval for an applicant’s acceptance into the program. No reason will be provided to mentor applicants rejected from participation in the program.

All mentors are expected to meet the eligibility criteria. However, extenuating circumstances may be reviewed at the discretion of the Learning Coaches and acceptance may then be allowed with written approval of the Program Director when all eligibility requirements are not clearly met. These instances are expected to be rare.

Documentation of the screening process must be maintained for each applicant and placed in confidential files.
### P.R.I.D.E. Mentoring Program POLICY

#### Training Policy

| Steering Committee Approval Date: __________ |
| Revision Date: __________ |

It is the policy of the P.R.I.D.E. Mentoring Program that all mentors and mentees attend an initial training session prior to being matched. The agendas must cover basic program guidelines, safety issues (including mandatory reporting), and communication/relationship building skills.

Each mentor and mentee will attend in-service on-going training sessions throughout the year. These in-service sessions will be pre-scheduled and offered at various times, for convenience, doing the term of Halifax Community College’s academic calendar year.

It is the responsibility of the mentor program learning coach to plan, develop, and deliver all training sessions with assistance from other agency staff, steering committee members, and volunteers. Evaluation forms will be collected from each training session for the purposes of evaluating/improving the content of the trainings and trainer performance.

---

### P.R.I.D.E. Mentoring Program POLICY

#### Matching Policy

| Steering Committee Approval Date: __________ |
| Revision Date: __________ |

It is the policy of the P.R.I.D.E. Mentoring Program that the mentor program learning coach will follow the guidelines outlined in the match procedure prior to creating a mentor/mentee match. The mentor program learning coach should use the factors outlined in the matching procedure to determine the suitability of a mentor/mentee match.

The mentor program learning coach will determine the suitability based on the following criteria:

- Preferences of the mentor, mentee, HCC advisors and counselor, school system counselors and staff and/or parent.
- Common interests
- Geographic proximity
- Similar personalities

Most Matches are male adult to male student. In some circumstances and with P.R.I.D.E. Program Director’s approval, it is acceptable for female mentors to be matched with male students.
P.R.I.D.E Mentoring Program Policy and Procedure Manual

SECTION 2. PROGRAM POLICIES

P.R.I.D.E. Mentoring Program POLICY

Match Support and Supervision Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program that the staff makes monthly phone or personal contact with all parties matched. Staff must gather information for that month including the dates and times spent participating in mentoring activities and a description of those activities, and assess the success of the match from all party’s perspectives. In the case of match difficulties, discord, or concerns, appropriate discussion and intervention must be undertaken to improve or rectify problem areas.

P.R.I.D.E. Program staff must follow the steps outlined in the Match Support and Supervision Procedure. Beyond monitoring the match relationship and activities, P.R.I.D.E. Program staff must undertake other efforts that support participants, such as regular group activities for matches, ongoing training events, a formal support structure for mentors, and the attainment of admission to HCC, P.R.I.D.E. and community events/activities for match participants.

P.R.I.D.E. Mentoring Program POLICY

Recognition Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program that all participants—including mentors, mentees, parents, schools, businesses, community organizations and other volunteers, be recognized as important to the success of the P.R.I.D.E. Mentoring Program. Particular emphasis will be placed upon recognizing the program’s volunteer mentors.

It is the responsibility of the learning coaches to, at minimum, plan and implement the following recognition activities:

- Host an annual recognition event including selection of a mentor, mentee, and HCC/P.R.I.D.E. Program volunteer of the year along with other outstanding service or performance acknowledgments
- Feature a mentor/mentee general match success story in each quarterly newsletter
- Establish a mentor recognition award system for length of service
- Utilize outstanding mentors to help deliver orientation and training sessions for the recruitment and matching of new mentors.
P.R.I.D.E. Mentoring Program POLICY

Record-Keeping Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program that each step of the mentoring application and match process be documented by creating a case file for each potential mentor and mentee. All forms for managing mentor and mentee case files are included within the procedures section of this manual.

All records are to be kept confidential and are to be covered by the conditions outlined in the confidentiality policy. Archival records or those records of past applicants and participants will be maintained and kept confidential for a period of 2 years after the close of their participation in the program. After 2 years, the records will be shredded and discarded with approval from the P.R.I.D.E. Program Director and Steering Committee.

The mentor program learning coach must keep stringent records of all program activities, utilizing approved forms. All files should be regularly maintained and updated within an electronic database and/or hard copy filing system.

The creation of new forms or the revision of existing forms must be documented and kept within the policy and procedure manual.
P.R.I.D.E. Mentoring Program POLICY

Confidentiality Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program to protect the confidentiality of its participants and their families. With the exception of the limitations listed below, P.R.I.D.E. Program staff will only share information about mentors, mentees, and their families with other P.R.I.D.E. Program staff and the Steering Committee. Further, all prospective mentors, mentees, and parents/guardians should be informed of the scope and limitations of confidentiality by P.R.I.D.E Program staff. Additionally, mentors are required to keep information about their mentee and his/her family confidential.

Records are considered the property of the Halifax Community College/P.R.I.D.E. Program not the HCC/P.R.I.D.E. workers, and are not available for review by mentors, mentees, or parents/guardians.

Limits of Confidentiality
Information from mentor and mentee records may be shared with individuals or organizations as specified below under the following conditions:

- Information may be gathered about program participants and shared with other participants, individuals, or organizations only upon receipt of signed “release” forms from mentors, mentees, school officials or parents.

- Identifying information (including names, photographs, videos, etc.) of P.R.I.D.E. Mentoring Program participants may be used in HCC/P.R.I.D.E. publications or promotional materials only upon written consent of the mentor, and mentee.
Transportation Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E Mentoring Program to allow mentors to transport mentees in their own private vehicles. The learning coach must ensure that all mentors meet the following criteria prior to transporting the mentee:

- All mentors must own a car or have access to reliable insured transportation; all safety equipment including blinkers, lights, brake and back-up lights, seat belts, tires, and brakes must be in good operating condition.
- All mentors must possess a valid driver’s license and present proof of auto insurance; a record of insurance will be maintained in the mentor’s file and will be updated on an annual basis.
- All mentors must have an acceptable driving record.
- P.R.I.D.E. Mentoring Program requires that mentors obey all traffic laws, and use seat belts.
- Mentors must also avoid taking medication or using any other substances that might impair their ability to drive.
- If an accident occurs while the mentor is engaged in mentoring, it should be reported to the learning coach promptly.
- P.R.I.D.E. will transport their students to their assigned schools when referring to the school base or community organization mentoring.
- P.R.I.D.E. participants are responsible for their own transportation in reference to their internship/workshop.

If any of the above policy is not followed, the mentor will not be allowed to transport the mentee in a private automobile or may face other consequences.
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 2. PROGRAM POLICIES

P.R.I.D.E. Mentoring Program POLICY

Overnight Visits and Out-of-Town Travel Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program to encourage mentor/mentee visits within their community and limit overnight visits. However, overnight visits and out-of-town trips are permitted under the following conditions:

- Overnight visits and out-of-town travel are only permitted after six months participation with a match.
  - Between six months and one year, overnight visits and out-of-town travel may occur only with approval from both the Mentor Program Learning Coach and the P.R.I.D.E. Program Director (under 18 must have parent consent). Out-of-town travel may occur only with the accompaniment of a person designated and approved by the P.R.I.D.E. Program.
  - After one year, both overnight visits and out-of-town travel may occur and the mentee and mentor may travel alone out of town with P.R.I.D.E Program permission (under 18 must have parent consent). All parties must report all such occurrences during their monthly contact with the P.R.I.D.E. staff, the nature of the activity, and the purpose.

- For any and all admissible out-of-town travel, the mentor and mentee must write and sign a permission slip stipulating (under the age 18 must have parents written consent):
  - The HCC student is permitted to travel with the mentor to the predetermined destination, specifying names and the location(s) being traveled to.
  - Permission for medical treatment in the case of a medical emergency.

- For any and all admissible out-of-town travel, the mentor must write out or type a detailed itinerary of the trip, and provide this to the parent/guardian (if under 18) or to the Learning Coach prior to leaving, and include the following:
  - The destination(s)
  - Phone numbers of their cell phone (optional), places being visited, and lodging
  - Times and dates of departure and arrival at each location being visited
  - Expected time of return

- For out-of-town trips of more than one day’s duration, the mentor must check in with the Mentor Program Learning Coach or parent/guardian (if under 18) daily by phone, if possible.

- During permissible out-of-town travel, the mentor should review and abide by all terms outlined in the transportation policy.
North Carolina Definition of child abuse and neglect

**Physical Abuse**  
**Citation: Gen. Stat. § 7B-101**

*Abused juvenile* means any child less than age 18 whose parent, guardian, custodian, or caretaker:
- Inflicts or allows to be inflicted upon the child a serious physical injury by other than accidental means.
- Creates or allows to be created a substantial risk of serious physical injury to the child by other than accidental means.
- Uses or allows to be used upon the child cruel or grossly inappropriate procedures or cruel or grossly inappropriate devices to modify behavior.

**Neglect**  
**Citation: Gen. Stat. § 7B-101**

*Neglected juvenile* means a child:
- Who does not receive proper care, supervision, or discipline from the child’s parent, guardian, custodian, or caretaker
- Who is not provided necessary medical or remedial care
- Who lives in an environment injurious to the child’s welfare
- Who has been placed for care or adoption in violation of law
Use of Alcohol, Drugs, Tobacco, and Firearms Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program to prohibit and discourage the use of drugs, alcohol, and firearms. Mentees and mentors are prohibited from using drugs or alcohol or possessing firearms while engaged in the mentoring relationship. Any suspected violations should be reported to the learning coach.

Alcoholic Beverages: No participant of the P.R.I.D.E. Mentoring Program will possess or consume beer, wine, or other alcoholic beverages while actively engaged or prior to actively engaging in mentoring, nor shall any participant endorse the use of alcohol. Mentors and mentees may go to a location where minors are allowed and alcohol is served provided that the mentor and HCC student do not consume any alcohol.

Drugs: No participant of the P.R.I.D.E. Mentoring Program will manufacture, possess, distribute, or use any illegal substance while engaged in mentoring or otherwise.

Tobacco: The intent of P.R.I.D.E is to create a smoke and tobacco-free environment. To that end, smoking and the use of all tobacco products are in designated areas outside the Halifax Community College buildings and those involved with the program must refrain from the use of such products while engaged in mentoring unless approved by the mentor program learning coach and/or program director. The use of tobacco products includes but is not limited to cigarettes, cigars, pipes, chewing tobacco, snuff, or other matters or substances that contain tobacco.

Weapons, Firearms, and Other Dangerous Materials: The possession or use of firearms, firecrackers, explosives, toxic or dangerous chemicals, or other lethal weapons, equipment, or material while participating in mentoring activities is strictly prohibited.

Any violation of this policy will result in the immediate suspension and/or termination of the mentoring relationship. In addition, violations of this policy may result in notification being given to legal authorities that may result in arrest or legal action, and may be punishable by fine and/or imprisonment.
Unacceptable Behavior Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program that unacceptable behaviors will not be tolerated on the part of mentors or mentees while participating in the program. This policy is in addition to behavioral requirements stipulated in other policies or procedures within this manual. This policy in no way is intended to replace or take precedence over other policies or procedures including, but not limited to, the following:

- Confidentiality Policy
- Transportation Policy
- Overnight Visits and Out-of-Town Travel Policy
- Mandatory Reporting of Child Abuse and Neglect Policy
- Use of Alcohol, Drugs, Tobacco, and Firearms Policy

A number of behaviors are regarded as incompatible with P.R.I.D.E. Mentoring Program goals, values, and program standards and therefore are considered unacceptable and prohibited while participants are engaged in mentoring activities:

- Unwelcome physical contact, such as inappropriate touching, patting, pinching, punching, and physical assault
- Unwelcome physical, verbal, visual, or behavioral mannerisms or conduct that denigrates, shows hostility, or aversion toward any individual
- Demeaning or exploitive behavior of either a sexual or nonsexual nature, including threats of such behavior
- Display of demeaning, suggestive, or pornographic material
- Known sexual abuse or neglect of a child
- Denigration, public or private, of any mentee parent/guardian or family member
- Denigration, public or private, of political or religious institutions or their leaders
- Intentional violation of any local, state, or federal law
- Drinking while driving under the influence of alcohol
- Possession of illegal substances

Any unacceptable behavior, as specified but not limited to the above, will result in a warning and/or disciplinary action including suspension or termination from participation in the mentoring program.
## P.R.I.D.E. Mentoring Program POLICY

### Closure Policy

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Mentoring Program that all mentors and mentees must participate in closure procedures when their match ends. Closure is defined as the ending of a formal match relationship regardless of the circumstances of the match ending or whether they intend to have future contact informally beyond the match duration. While no party is expected to continue the relationship beyond the formal end of a match, matches may continue in the program beyond the contract period (one year for P.R.I.D.E. matches) and receive ongoing support and supervision.

Closure can occur for any number of reasons including: the contracted match duration has ended, one or both participants do not want to continue the match, there are changes in life circumstances of either the mentor or mentee, or an individual no longer meets the requirements for program participation. Hence, the match may end at the discretion of the mentor, mentee, parent/guardian (if under the age of 18), and/or the learning coach. It is left to the discretion of the learning coach whether an individual will be reassigned to another match in the future based upon past participation performance and current goals and needs of the program.

Future contact will be at the mutual and informal agreement of the mentor, the mentee, and the parent/guardian (if under the age of 18). If future contact is agreed upon, the P.R.I.D.E. Mentoring Program will not be responsible for monitoring and supporting the match after the match has ended. The mentor program learning coach will verbally and in writing inform all parties—the mentor, mentee, school, business and/or the parent—that the formal match has ended and that P.R.I.D.E. will not be liable for any incidents that occur after the match has closed.
P.R.I.D.E. Mentoring Program POLICY

**Evaluation Policy**

Steering Committee Approval Date: __________
Revision Date: __________

It is the policy of the P.R.I.D.E. Program that evaluation will be a key component in measuring the success of its mentoring program and for making continuous improvements in the effectiveness and delivery of mentoring services.

Evaluation data will be collected every six months for mentees in the program, including the following general measures: students’ self-esteem, academic performance, peer and parent relationships, moods, alcohol and substance use, and extra-curricular activities.

P.R.I.D.E. Program staff will be responsible for evaluation efforts, and will oversee the agreement made with Halifax Community College to implement actual evaluation activities and data.
P.R.I.D.E. Mentoring Program Procedure

Recruitment Procedure
Steering Committee Approval Date: __________
Revision Date: __________

1. All P.R.I.D.E. staff members receive training on the principles of volunteer recruitment and are required to understand the mentoring program’s recruitment plan.

2. The Learning Coach supervising the mentor program will take the lead in developing the Annual Recruitment Plan with input from the P.R.I.D.E. Program staff, the P.R.I.D.E. Program Director, and Steering Committee. Planning should be finalized, including program director and steering committee approvals, one month prior to the beginning of the new fiscal year.

3. The Learning Coach supervising the mentor program will complete a detailed Quarterly Recruitment Activity Plan of specific tasks, roles and responsibilities, and a week-by-week timeline, incorporating other staff, the program director, and steering committee members to implement specific recruitment activities. This activity plan must be reviewed and approved by the program director and/or steering committee prior to implementation.

4. The Learning Coaches are responsible for ensuring implementation of the Annual Recruitment and Quarterly Activity Plans.

5. The Learning Coaches will finalize and distribute the quarterly recruitment activity plan to the P.R.I.D.E. staff and the steering committee.

6. The Learning Coaches will summarize the Volunteer Inquiry Tracking log and provide the results to the P.R.I.D.E. Program Director on a monthly basis along with the number of successful matches.

7. Based on tracking data and the overall effectiveness of the recruiting efforts, staff will revise the strategy as needed.
P.R.I.D.E. Mentoring Program

Mentor Job Description

The P.R.I.D.E Mentoring Program at Halifax Community College assist in empowering Halifax Community College male students to make positive life choices that enable them to maximize their personal and academic potential, along with social responsibilities.

The P.R.I.D.E. Mentoring Program uses adult volunteers to commit to supporting, guiding, and being a friend to a HCC male student for a period of at least one year. By becoming a part of the social network of adults and community members who care about the youth in our community, the mentorship can help HCC male students develop and reach positive academic, career, and personal goals.

Mentor Role

- Take the lead in supporting a Halifax Community College male student through an ongoing, one-to-one and/group relationship
- Serve as a positive role model and friend
- Build the relationship by planning and participating in activities together
- Strive for mutual respect
- Build self-esteem and motivation
- Help set goals and work toward accomplishing them

Time Commitment

- Make a one-year commitment
- Spend a minimum of four hours per month communicating with a mentee
- Communicate with the mentee weekly via text, e-mail, phone, etc...
- Attend an initial training session and on-going support training sessions throughout the HCC academic calendar year while participating in the program
- Attend optional mentor/mentee group events, mentor support groups, and program recognition events

Participation Requirements

- Be at least 25 years old
- Reside in the Roanoke Rapids/Weldon metro area
- Be interested in working with Halifax Community College first or second year male students
- Be willing to adhere to all program policies and procedures
- Be willing to complete the application and screening process
- Be dependable and consistent in meeting the time commitments
- Attend mentor training sessions as prescribed
- Be willing to communicate regularly with program staff, submit activity information, and take constructive feedback regarding mentoring activities
SECTION 3. PROGRAM PROCEDURES

- Have an acceptable criminal history
- No use of illicit drugs
- No use of alcohol or controlled substances in an inappropriate manner
- Not currently in treatment for substance abuse
- Not currently in treatment for a mental disorder or hospitalized for such in the past three years

Desirable Qualities
- Willing listener
- Encouraging and supportive
- Patient and flexible
- Tolerant and respectful of individual differences

Benefits
- Personal fulfillment through contribution to the community and individuals
- Satisfaction in helping someone mature, progress, and achieve goals
- Training sessions and group activities
- Participation in a mentor support group
- Mileage and expenses are tax deductible
- Personal ongoing support, supervision to help the match succeed
- Mentee/mentor group activities, complimentary tickets to Halifax Community College and community events, participant recognition events

Application and Screening Process
- Written application
- Driving record check
- Criminal history check: state, child abuse and neglect registry, sexual offender registry
- Personal interview
- Provide three personal references
- Attend initial mentor training

For more information, contact the P.R.I.D.E. Mentoring Program at (252) 536-7282 or mearl@halifaxcc.edu.

MEN ARE ENCOURAGED TO APPLY
SECTION 3. PROGRAM PROCEDURES

Annual Recruitment Plan

Recruitment Objective
Attract 95 Personal, Professional, Community, and/or Academic Mentors/Mentees matched with Halifax Community College P.R.I.D.E. participants by August 31, 2010.

Target Audience
Mature adults, businesses, schools, churches, and community organizations, in the Roanoke Rapids/Weldon metro area,

Positioning Statement or Core Communication Message
P.R.I.D.E. Mentoring Program, developing a positive vision and reality for our students.

Promotional Materials
- P.R.I.D.E. Mentoring Program brochure (tri-fold)
- Informational flyers/Postcards
- Newsletter
- Press releases/Public Service Announcements (PSA)
- Generic news article (for newsletters, papers, and local magazines)
- Program presentation with overheads, notes, and handouts
- Web site development

Promotional Activities
- Place brochure and flyer throughout the community (continuous)
- Mail Postcards to potential professional and personal mentors
- Display tables at local events (as available)
- Distribute newsletter (quarterly)
- Distribute press release and PSA to local media (quarterly)
- Make personal contact with key media and organization leaders (2–3 per month)
- Present to community organizations (1–2 times per month)
- Garner inquiries from Web site (online interest form) and e-mail (continuous)

Target Organizations
- Local Schools: Halifax Community College, Weldon, Halifax, Northampton, and Roanoke Rapids School Systems
- Local Businesses: Halifax regional Medical Center, Wal-Mart, Lowes, Weldon Center, Mudd Castle Community Center
- Professional Associations: Halifax Chamber of Commerce, Northampton County Chamber of Commerce, Black Business Alliances, Black Ministerial Alliances
- Churches/Faith-Based Groups:
- Governmental Agencies: Police and Fire Departments, T.J. Davis Recreational Center
- Fraternities, Rotaries, Lions
### 2010 Annual Recruitment Plan Timeline

<table>
<thead>
<tr>
<th>Recruitment Activity</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>Aug</th>
<th>Sept</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brochure and flyer placement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>P.R.I.D.E newsletter</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Display tables – local events (TBD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Press release/PSA distribution</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal contacts: 1–2/mo.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organization presentations: 1–2/mo.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Web site/electronic solicitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Quarterly Recruitment Activity Plan
First Quarter, 2010

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date Complete</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Promotional Material Development:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Update Brochure – new copy, photos</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Press Release/PSA – New Board president announcement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Web Site Update – Add page for Board w/pictures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Write Newsletter – 2nd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Promotional Activities:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inquiry Responses – Web, phone, e-mail</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mail Out First Quarter Newsletter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distribute Brochures, Flyers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentor Orientation Session</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Display Table – Halifax Community College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact Rotary – Request to speak at Q2 meeting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting/Presentation –</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentor Orientation Session,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chamber Luncheon Speech</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting/Presentation – Save Ministries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentor Orientation Session,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Steering Committee Presentation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radio/newsletter/ PSA Interview</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
P.R.I.D.E. Mentoring Program POLICY

Inquiry Procedure

Steering Committee Approval Date: __________
Revision Date: __________

All persons inquiring to be P.R.I.D.E. Mentoring Program participants or making referrals regarding potential mentees must speak directly to the learning coach. If the learning coach is unavailable, other P.R.I.D.E staff members should courteously take a message and inform inquirers they will be contacted within two business days. P.R.I.D.E. Program staff must follow the inquiry procedure as outlined below:

1. All prospective mentor inquiries will be recorded on the Volunteer Inquiry Tracking form, including how the person heard about the program.

2. All mentor and mentee inquiries regarding participation in the program must be answered within two business days.

3. P.R.I.D.E. Program staff provides a verbal overview of the program to all phone and in-person inquiries, adjusting the message to whether they are potential mentors or mentees:
   - Overview of program and program purpose
   - Time and duration commitments
   - Overview screening requirements
   - Training requirements
   - Next step is to attend an orientation session

4. All prospective participants requesting to learn more and/or wanting to attend an orientation session will receive the following materials in person or by mail:
   - Program brochure and/or postcard
   - Mentor job description (mentors only)
   - Application packet for Mentor or Mentee
   - The times and dates of upcoming orientation sessions for mentors or mentee

5. The Learning Coach must then hold separate one-hour mentor and mentee orientation sessions at least once a month to provide more detailed information about the program. Orientation sessions are held primarily to create interest among prospective participants and allay any concerns they may have about the program.

6. After prospective participants attend the orientation session and submit an application, the mentor program learning coach may then complete the screening procedure for those who are interested and willing to make the required commitment.
Mentor Orientation Session Outline

Session Title: Mentoring Is Powerful (and Fun)!

Interested mentors will receive a calendar of scheduled mentor orientations and will be asked to choose a scheduled time and date.

The objectives of the orientation are intended to:

- Generate enthusiasm among prospective mentors.
- Provide a basic understanding of the P.R.I.D.E. Mentoring Program and mentor roles and expectations
- Help mentors determine if they want to complete an application and continue through the screening process
- Explore simple and effective approaches to mentoring

The agenda for this one-hour informational orientation session provides approximate times for each section and might include the following:

1. **Icebreaker: Introductions** (10 minutes)
   Conduct short, interactive activity that allows mentors and P.R.I.D.E. staff to introduce themselves to a partner or potential mentor, to a small group, and then to the entire group

2. **The Power of Mentoring** (15 minutes)
   Have current mentor(s) speak and reflect on the benefits to themselves as mentors

3. **P.R.I.D.E. Mentoring Program** (15 minutes)
   Overview of P.R.I.D.E Mentoring Program including brief description of screening process/steps, training and time commitments

4. **HCC Male Students’ in the Program** (10 minutes)
   Have current P.R.I.D.E. mentee(s) speak about the benefits to themselves from having a mentor in their lives

5. **Wrap-Up** (10 minutes)
   Thank prospective mentors for coming and provide application packets and business cards for them to take
P.R.I.D.E. Mentee Orientation Session Outline

Session Title: Mentoring Is Powerful and Fun!

Interested mentees and/or their parent/guardian will receive a calendar with scheduled mentee orientations to attend.

The objectives of the orientation are to help prospective mentees:

- Develop a basic understanding of the P.R.I.D.E. Mentoring Program and mentee roles and expectations
- Determine if they want to complete an application and continue through the screening process
- Begin to explore the possible benefits of mentoring

An agenda for this one-hour informational session provides approximate times for each section and might include the following:

1. **Icebreaker: Introductions** (10 minutes)
   Conduct fun interactive group activity that allows mentees and parents/guardians to interact and get more comfortable in the group

2. **Mentoring Is Powerful and Fun** (15 minutes)
   Have current mentors speak and reflect on the types of things they do with their mentees and why they are interested in working with HCC male students

3. **P.R.I.D.E. Mentoring Program** (15 minutes)
   Overview of the P.R.I.D.E. Mentoring Program including: intake, approval and matching processes, training, time commitment, types of activities, and other benefits of participation

4. **HCC Student’s in P.R.I.D.E Mentoring Program** (10 minutes)
   Have current mentees speak about what they have gotten from the program and what it is like to have a mentor

5. **Wrap-Up** (10 minutes)
   Thank prospective mentees and their parents/guardians for coming and provide application packets and business cards for them to take
### Volunteer Inquiry Tracking Form

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>How did they learn about program?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

**P.R.I.D.E. Mentoring Program Procedure**

**Mentor Screening Procedure**

Steering Committee Approval Date: __________
Revision Date: __________

In accordance with the P.R.I.D.E Mentoring Program eligibility and screening policies, the P.R.I.D.E. Program staff should complete the steps below to determine if a candidate qualifies to become a mentor.

1. The applicants must return all completed materials in the application packet given to them during the inquiry process.

2. A mentor file will be created for all prospective mentors who return an application. A Mentor Contact Sheet will be kept on top of each file. The file should also contain the Mentor Assessment Summary followed by all other application materials and interview notes. As each component of the screening process is completed, the checklist on the Mentor Assessment Summary will be updated.

3. P.R.I.D.E. Program staff members should:
   - Make an appointment and conduct an in-person interview with the prospective mentor
   - Conduct phone interviews with three personal references
   - Process child abuse registry, and sexual offender registry checks

4. Based on all information gathered above, complete the volunteer assessment and make a determination as to the appropriateness of the participant’s involvement in the program.

5. Send out an acceptance or rejection letter to the applicant based on the overall assessment of appropriateness.

6. If applicant is rejected, the applicant’s file should be placed into the file area of ineligible applicants.

7. If the applicant is accepted, the mentor must complete the initial training session prior to being matched with a mentee.
Please attach your resume upon completion of this form.

Name: 

Address: 

City: State: Zip: 

Name and address of employer: 

Are you a U.S. citizen? Yes No Profession: 

Phone: Home Cell Work 

E-mail Emergency contact name: Phone: 

Where did you hear about The P.R.I.D.E. Mentoring Program Services and our volunteer opportunities? 

Have you been convicted of a felony within the past five years? Yes No If Yes, please explain: 

If you have a disability, what accommodations would you need? 

When are you available to volunteer? 

Time of Day: Day(s) of the Week: 

How often per month? 

What skills, training or knowledge do you wish to utilize as a volunteer for the P.R.I.D.E. Mentoring Program?
What training, resources or support do you anticipate needing to do this volunteer work?
_______________________________________________________________________
_______________________________________________________________________

Please provide two personal or professional references:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I declare that I am offering to volunteer to provide services for civic, charitable, or humanitarian reasons and I am doing so freely and without coercion from the Halifax Community College. I realize that I will not receive nor do I expect compensation for the services I am offering.

I authorize Halifax Community College to contact any organizations or individual that I have listed on my volunteer application and/or resume.

I hereby attest that the above information is true to the best of my knowledge.

_____________________               ________________________________
Signature                                                      Today’s Date

Please return or mail this application and the items listed above to:

P.R.I.D.E of Halifax Community College,

Building 300, Room 303,

Weldon, N.C. 27890
Information Release

I, _________________________________________, understand it will be necessary for P.R.I.D.E Mentoring Program to conduct a background check regarding my criminal history, personal references, and employment.

I authorize P.R.I.D.E. Mentoring Program to obtain any needed information regarding my criminal history, character references, and employment from any state or federal agency, my employer, and personal references for the purposes of participating in a mentoring program.

Further, I understand that information about me will be anonymously (without my name) shared with a prospective mentee(s) and if under the age of 18, his parent(s), to aid in determining a suitable match. Once a mentor/mentee match is determined, my identity and any other information known about me may be shared with the mentee and if under 18, his parent/guardian to ensure and aid in facilitating a safe and successful match relationship.

__________________________________________________________________________  ______________________________________
Signature                                                                  Date

Full Name________________________________________________________________________

Address______________________________ City_____________ State____ Zip_____

Date of Birth ______/_____/________

Social Security Number_______/_______/________

Current Driver’s License No.___________________ State: __________

Please list any other cities, states, and dates of residency during the past 10 years.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>From (m/year)</th>
<th>to (m/year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P.R.I.D.E.
Personal References

Please list the names, addresses, and phone numbers of three people you would like to use as character references (only people you have known for at least a year). Include at least one relative. Any information P.R.I.D.E. Mentoring Program gathers from these references will be held as confidential and not released to you, the applicant.

Relative’s Name: ________________________________
Address: _______________________________________
City: ___________________ State: _______________ Zip: ________
Phone: ________________________________
Relationship: _______________ How long known: _______________ 

Name: ________________________________
Address: _______________________________________
City: ___________________ State: _______________ Zip: ________
Phone: ________________________________
Relationship: _______________ How long known: _______________ 

Name: ________________________________
Address: _______________________________________
City: ___________________ State: _______________ Zip: ________
Phone: ________________________________
Relationship: _______________ How long known: _______________ 

Mentor Interest Survey

Name: ____________________________________________ Date: __________

Please complete all the following. This survey will help P.R.I.D.E. Mentoring Program know more about you and your interests and help us find a good match for you.

What are the most convenient times for you to meet with your mentee? Please check all that apply.

Weekdays: Mornings ___ Lunchtime: ___ Evenings: ___ Weekends: ___ Other: ___

Do you speak any languages other than English? If so, which languages?

Would you be willing to work with a student who has disabilities? If so, please specify disabilities you would be willing to work with. ________________________________

What are some favorite things you like to do with other people?

What are your favorite subjects to read about?

What is your job and how did you choose this field?

What is one goal you have set for the future?

If you could learn something new, what would it be?

What person do you most admire and why?

Describe your ideal Saturday.

Please check all activities you are interested in:

<table>
<thead>
<tr>
<th></th>
<th>Biking</th>
<th>Camping</th>
<th>Science</th>
<th>Cooking</th>
<th>Library</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hiking</td>
<td>Boating</td>
<td>Music</td>
<td>Sports</td>
<td>Yoga</td>
</tr>
<tr>
<td></td>
<td>Golf</td>
<td>Swimming</td>
<td>Gardening</td>
<td>Parks</td>
<td>Movies</td>
</tr>
<tr>
<td></td>
<td>Fishing</td>
<td>Animals/Pets</td>
<td>Painting/Photos</td>
<td>Board Games</td>
<td>Shopping</td>
</tr>
</tbody>
</table>

List any other areas of strong interest:
Mentor Interview

Applicant Name: ________________________________________

Date: ______________________

Interviewed by: ________________________________________

I need to ask a number of questions about you that will help me in matching you with a mentee. Some of the questions are personal and this interview is confidential. However, I am required to report anything that indicates you have done or may do harm to yourself or others. Some information, like personal qualities and what you would like to do with a mentee or things you are interested in may be shared with a prospective mentee and if the mentee is under 18, their parents. Do you understand?

1. Why do you think you can help students by mentoring?

2. What do you think are your strengths?

3. How about your weaknesses?

4. What type of student would you like to be matched with?

5. Will you be able to fulfill the commitments of the program – 4 hours of communication monthly for one year? Via text, e-mail, phone etc…

6. What was your own childhood like?

7. Have you ever abused or molested a youth?

8. Have you ever been arrested? If so, when and for what?

9. Do you currently use any alcohol, drugs, or tobacco?

10. Have you ever undergone treatment for alcohol or substance abuse?

11. Have you ever been treated or hospitalized for a mental condition?

12. Do you have any experience working in an educational environment or youths? If so, how will it help you in working with your mentee?

13. What challenges do you think young people face today that they need help with the most?

14. Mentoring a young person is a big responsibility and can change the lives of both the mentor and the mentee. What do you hope to gain from the experience and what do you hope the mentee gains from the relationship?

15. What are some of the biggest problems in the world or in your community that concern you?
16. What types of activities would you do with a mentee?

17. Who else in your household might be present at any given time when you are with your mentee?

18. What hobbies or interests do you have?

19. At this point, clarify any questions of concern that arose from the written application.

20. Do you have any questions about the program I can answer for you?

**Interviewer Comments:**
P.R.I.D.E Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

Personal Reference Interview

Applicant name: _________________________________    Date: ________________

Interviewed by: __________________________________

Personal Reference Name: _________________________________

Personal Reference Phone Number: ______________________________

Your name has been given to us as a reference for ______________________________ (mentor), who has applied to be a mentor in our program. I would like to ask you some questions about him/her, which will be held in absolute confidence; it will not be shared or accessible to him/her. Would you be willing and is this a good time for you to answer a number of questions?

1. How long, and in what capacity, have you known the applicant?
2. How does the applicant relate to people in general?
3. How would you describe the applicant?
4. Do you feel that the applicant would be a good mentor and role model to a HCC male student?
5. Do you think that the applicant relates well to young people?
6. Does the applicant usually keep his/her commitments?
7. Is he/she on time for appointments and events?
8. To your knowledge, has the applicant ever been convicted of a crime?
9. Do you know of any problems or issues that would affect the applicant’s ability to work with a HCC or _______ student?
10. Would you feel comfortable allowing the applicant to spend time alone with your child?
11. Do you have any additional comments about the applicant?

Interviewer Comments:
Mentor Assessment Summary

Name: ____________________________________________  Date: _____________

<table>
<thead>
<tr>
<th>Screening Materials</th>
<th>Date Sent to Applicant</th>
<th>Date Rec’d From Applicant</th>
<th>Date Sent to Agency</th>
<th>Date Item Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Application</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copy of Driver’s License</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information Release</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal References</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest Survey</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Criminal History Release Form</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Abuse &amp; Neglect Release Form</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Offender Release Form</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteer Interview</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Reference Interview</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Reference Interview</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Reference Interview</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acceptance/Rejection Letter</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Eligibility Criteria
Does the applicant meet each of the eligibility criteria? Please check the appropriate box.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Eligibility Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>25 years of age or older</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Resides in Roanoke Rapids/Weldon metro area</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Willing to adhere to program policies and procedures</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Agrees to a one-year commitment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Commits to 4 hours per month via text, e-mail, phone, etc...</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Completed screening procedure</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Agrees to attend required training sessions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Willing to communicate regularly with learning coach and submit monthly meeting and activity information</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Has reliable transportation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Has acceptable criminal history</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Has never been accused, arrested, charged, or convicted of child sexual abuse</td>
</tr>
</tbody>
</table>

P.R.I.D.E.
Eligibility Criteria (cont.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has not been convicted of a felony in past seven years</td>
<td></td>
</tr>
<tr>
<td>Does not use illicit drugs</td>
<td></td>
</tr>
<tr>
<td>Does not use alcohol or controlled substances inappropriately</td>
<td></td>
</tr>
<tr>
<td>Is not in treatment for substance abuse; has had a non-addictive period for at least the past five years</td>
<td></td>
</tr>
<tr>
<td>Has not been hospitalized for a mental disorder in past year</td>
<td></td>
</tr>
<tr>
<td>Has not falsified information during screening process</td>
<td></td>
</tr>
</tbody>
</table>

Does the mentor applicant meet all eligibility criteria? Yes ______ No________

If no, are there any mitigating circumstances?

**General Assessment Areas**

Did the applicant relate appropriately to the program staff during the following steps?
- Initial contact and inquiry
- Orientation
- Interview

Did the applicant complete the screening process with ease and appropriateness?

Are his/her reasons for wanting to be a mentor appropriate?

Is the applicant’s personal and professional life appropriate and stable?

Does the applicant exhibit qualities of open-mindedness, flexibility, and emotional stability?

Does the applicant have experience working with youth?

Did the applicant’s references speak well of him/her?

Does the individual have appropriate age-related interests and ability?

**Overall comments:**
**Recommendation:**

Recommendation To Approve: Yes: _________  No: ______________

Reasons Why:

**Approval:**

Approved: Yes: __________  No: ______________

By: ________________________________________________________

By: ________________________________________________________

By: ________________________________________________________

By: ________________________________________________________

Date: __________
February 27, 2010

Mr. Jim Do-Right
4321 Going Somewhere Blvd.
Henrico NC, 27842

Dear Mr. Do-Right,

Congratulations!

On behalf of the P.R.I.D.E. Mentoring Program, we are happy to inform you of your acceptance as a mentor. Without the enthusiasm of volunteers like you, we would not be able to accomplish our mission.

We thank you for taking the time and effort to join our program and we look forward to continuing to support you and assist you as a mentor. At this time, we are working on finding you a suitable match and will contact you when we have found you a mentee.

Sincerely,

Michael Earl
Mentor Program Learning Coach
P.R.I.D.E. Mentoring Program
Mentor Rejection Letter

February 27, 2010

Mr. Pookie Dem
4321 Going Nowhere Ave.
Henrico, N.C. 27832

Dear Mr. Pookie Dem,

On behalf of the P.R.I.D.E. Mentoring Program, I wanted to express my sincere thanks for your interest in our program. I understand that you have given a considerable amount of time to this process and we greatly appreciate your effort. Unfortunately, we are unable to accept your application to be a mentor for our program.

Thank you again for your time and interest in our program.

Sincerely,

Michael Earl
Mentor Program Learning Coach
P.R.I.D.E. Mentoring Program
### P.R.I.D.E Mentor Contact Sheet

Name of Mentor: _____________________________  Date of Birth: __________________

Home Phone: ____________  Work Phone: ____________  E-Mail: _________________

Mentee Name: ____________________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose/Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Mentee Screening Procedure

Steering Committee Approval Date: __________
Revision Date: __________

In accordance with the P.R.I.D.E Mentoring Program eligibility and screening policies, program staff should complete the steps below to determine if a candidate qualifies to become a mentee.

1. Be a first or second year student enrolled at Halifax Community College

2. Be a P.R.I.D.E. Program participant

3. Upon receiving a referral for any student, program staff must begin the process by mailing the student or Parent/Guardian if the student is under the age of 18) a Referral Letter with dates and times of upcoming mentee orientation sessions, and an application packet. It is advised that the staff do a follow-up call to the student or parent/guardian (if under 18) within 72 hours of mailing the letter.

4. The applicant must return all completed materials in the application packet given to them during the inquiry process, including the Written Application, Contact and Information Release, and Mentee Interest Survey.

5. A mentee file will be created for all prospective mentees who return a completed application. A Mentee Contact Sheet will be kept on top of one side of each file. The file should also contain the Mentee Assessment Summary followed by all other application materials and interview notes. As each component of the screening process is completed, the checklist on the Mentee Assessment Summary will be updated.

6. P.R.I.D.E. Program staff must then make an appointment and conduct an in-person interview with the prospective mentee.

7. Based on all information gathered above, complete the Mentee Assessment Summary and make a final determination as to the appropriateness of the participant’s involvement in the program.

8. Send out an acceptance or rejection letter to the mentee or parent/guardian (under 18) based on the overall assessment of appropriateness.

9. If applicant is rejected, the applicant’s file should be placed into the file area of ineligible applicants.

10. If the applicant is accepted, the mentee must complete the initial two-hour training prior to being matched with a mentor.
Mentee Referral Form

Students’ name: ___________________________________________________________

Age: __________________ Classification/Grade ____________________________

Major/School: ___________________________________________________________

Requested by: ___________________________________________________________

Position: __________________ Phone Number: _____________________________

The child is being referred for assistance in the following areas (check all that apply):

<table>
<thead>
<tr>
<th>Academic Issues</th>
<th>Behavioral Issues</th>
<th>Delinquency</th>
<th>Vocational Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Esteem</td>
<td>Study Habits</td>
<td>Social Skills</td>
<td>Peer Relationships</td>
</tr>
<tr>
<td>Family Issues</td>
<td>Special Needs</td>
<td>Attitude</td>
<td>Other, specify:</td>
</tr>
</tbody>
</table>

Why do you feel this student might benefit from a mentor?

What particular interests do you know of that the student has?

What strategies/learning models might be effective for a mentor working with this student?

On a scale of 1–10 (10 being highest) rate the student’s level of:

____ Academic performance
____ Social skills
____ Self-esteem
____ Family support
____ Communication skills
____ Attitude about education
____ Peer relations

With what specific academic subjects, if any, does the student need assistance?

Additional comments:
Mentee Referral Letter

February 27, 2010

Dear ______________________

You have been referred to participate in the P.R.I.D.E. Mentoring Program that matches a community volunteer with a Halifax Community College male student to serve as a one-to-one mentor. The mentor role is that of a friend, coach, and guide. A mentor would meet with and/or contact you 4 hours out the month for a year and take personal interest in your growth, development, and in accomplishing your goals here at Halifax Community College.

We hope that you will participate in the program. P.R.I.D.E. will offer support and guidance for both you and your chosen mentor and will do our best to ensure the success of the relationship.

Please read and fill out the Program Brochure, Written Application, Contact and Information Release, and Mentee Interest Survey. If you have any questions, please feel free to contact me.

I look forward to hearing from you.

Sincerely,

Michael Earl
Mentor Program Learning Coach
P.R.I.D.E. Mentoring Program
(252) 536-7282
February 27, 2010

Dear ________________________

Your son has been referred to participate in the P.R.I.D.E. Mentoring Program that matches a Halifax Community College male student with a student at your child’s school to serve as a one-to-one mentor. The mentor role is that of a friend, coach, and guide. A mentor would meet with the student once a week for the school year and take personal interest in his academic, behavioral, and social growth to assist in his being successful.

We hope that you will allow your child to participate in the program. P.R.I.D.E. Learning Coaches will offer support and guidance for both your son and his chosen Halifax Community College mentor. We will do our best to ensure the success of the relationship.

Please read and fill out the Program Written Application, Contact and Information Release, and Mentee Interest Survey. If you have any questions, please feel free to contact me.

I look forward to hearing from you.

Sincerely,

Michael Earl
Mentor Program Learning Coach
P.R.I.D.E. Mentoring Program
(252) 536-7282
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentee Application
(P.R.I.D.E. Participants)

Personal Information

HCC Student Name: _______________________________ Date: ________

Parent/Guardian Name: ________________________________

Relationship to Student: Mother ___ Father ___ other, specify: __________________

Street Address: __________________________________________

City: __________________________ State: _____ Zip: _________________

Home phone: _______________ Work phone: ________________

Date of Birth ___/___/____ Age: __________ Gender: Male___ Female ___


Name of School: ________________________________ Grade: __________

Emergency Contact Name: ___________________________ Phone Number: __________

Please list all members of your household:

<table>
<thead>
<tr>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Relationship to Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Application Questions
Please answer all of the following questions as completely as possible. If more space is needed, use an extra sheet of paper or write on the back of this page.

1. Why do you want to participate in a mentoring program?

2. Briefly describe your expectations for the P.R.I.D.E. Mentoring Program:
3. Are you available to meet with a mentor four hours per month and have contact at least once a week for a minimum of one year? Please explain any particular scheduling issues.

4. Are you willing to attend an initial mentee training session and ongoing training/support sessions throughout the HCC academic calendar year after being matched?

5. Describe your performance including grades, homework, attendance, behaviors, etc. while attending Halifax Community College

6. Do you have friends? Please describe the friendships.

7. Are you currently having any problems at home, in the community, or at HCC?

8. Have you experienced any traumatic events (i.e., death in the family, abuse, divorce)? If yes, please provide details.

9. Can you provide any additional background information that may be helpful to the P.R.I.D.E. Mentoring Program in matching you with an appropriate mentor?

**Medical History**

Name of Primary Care Physician: ___________________________ Phone No.: __________

Medical Insurance Provider: _____________________________________________

Policy Number: ___________________________ Phone No.: _____________

Do you have any physical problems or limitations?

Are you currently receiving treatment for any medical issues?

Are you currently on any type of medication? Is so, please specify.

Do you have any known allergies or adverse reactions to medications? If yes, please describe them below:

Do you have any emotional issues or problems right now?

Are you currently seeing a counselor or therapist?

Therapist’s Name: _____________________________

**Please read this carefully before signing**

P.R.I.D.E. Mentoring Program appreciates you and your son’s interest in becoming a mentee. This application is intended as a means of informing and gaining the consent of the parent/guardian to allow their son to participate in the P.R.I.D.E Mentoring Program. After receiving this completed application from you, we will evaluate the information and send you a letter letting you know if your son has been accepted into the mentoring
program. Much of the information you supply in this application packet will be used to match your son with an appropriate mentor. Therefore, the P.R.I.D.E. staff may, at times, need to access and share this information with prospective mentors and other parties when it is in the best interest of the match. However, we do not reveal names until there is an initial interest from the mentee, parent/guardian, and mentor based first upon anonymous information provided about each other.

**Please initial each of the following**

- ______ I give my informed consent and permission to participate in the P.R.I.D.E. Mentoring Program and their related activities.
- ______ I agree to follow all mentoring program guidelines and understand that any violation on my part may result in suspension and/or termination of the mentoring relationship.
- ______ I hereby acknowledge that I may be transported by my mentor and/or P.R.I.D.E. staff or representatives while participating in the P.R.I.D.E Program and that such transportation is voluntary at my own risk.
- ______ I release the P.R.I.D.E. Mentoring Program of all liability of injury, death, or other damages to me, that may result from my participation in the program, including but not limited to transportation, and hold harmless any P.R.I.D.E. mentor, program staff, or other representatives, both collectively and individually, of any injury, physical or emotional, other than where gross negligence has been determined.
- ______ I agree to allow P.R.I.D.E. to use any photographic image of my son taken while participating in the mentoring program. These images may be used in promotions or other related marketing materials. *(Optional)*

I understand I must return all of the following *completed* items along with this application, and that any incomplete information will result in the delay of my application being processed:

- Contact and Information Release Form
- Interest Survey Form

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

_____________________________________________________  ____________
Parent/Guardian Signature                                                            Date

*Please return or mail this application and the items listed above to:*

Mentor Program Learning Coach,

P.R.I.D.E of Halifax Community College,

Building 300, Room 303,

Weldon, N.C. 27890
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentee Application
(To Be Completed by School or Community Organization)

Personal Information

Student Name: ________________________________ Date: __________

Parent/Guardian Name: ____________________________

Street Address: ______________________________________

City: __________________________ State: _____ Zip: __________

Home phone: ________________ Work phone: ________________

Date of Birth ___/___/___ Age: __________ Gender: Male____ Female ___


School: ________________________________ Grade: __________

Emergency Contact Name: __________________________ Phone Number: __________

Application Questions for the School/Parent

1. Does the student have any physical problems or limitations?

2. Is the student currently receiving treatment for any medical issues?

3. Is the student currently on any type of medication? If so, please specify.

4. Does the student have any known allergies or adverse reactions to medications? If yes, please describe them below:

5. Does the student have any emotional issues or problems right now?

6. Is the student currently seeing a counselor or therapist?
Application Questions for the Student

Please answer all of the following questions as completely as possible. If more space is needed, use an extra sheet of paper or write on the back of this page.

1. How do you think being in the mentoring program can help you?

2. What do you want the guys from Halifax Community College to do when you sit down one on one with them for one hour?

3. Are you willing to meet with the HCC student for 1 hour a week to discuss a thing that has been going on with you and whatever is on your mind?

4. Describe your attitude and how you are doing with your grades, homework, attendance, behaviors, etc. while in school

5. Do you think that makes your parents happy?

6. Do you have friends? Please describe your friends?

7. Would your parents approve of the friends you hang around with at school?

8. Are you currently having any problems at home or at school?

9. Have you experienced any traumatic events (i.e., death in the family, abuse, divorce)? If yes, please provide details.

10. Is there anything you would like the HCC student to know about you before you meet him?

Please read this carefully before signing

P.R.I.D.E. Mentoring Program appreciates the school showing interest in your child becoming a mentee. This application is intended as a means of informing and gaining your consent to participate in the P.R.I.D.E Mentoring Program. After receiving this completed application from you, we will evaluate the information and send you a letter letting you know if your child has been accepted into the mentoring program. Much of the information you supply in this application packet will be used to match you with an appropriate mentor.

Please initial each of the following

_______ I give my informed consent and permission for my child to participate in the P.R.I.D.E. Mentoring Program and its related activities.

_______ I agree to all the school and mentoring program guidelines and understand that any violation on my part may result in suspension and/or termination of the mentoring relationship.

_______ I agree to allow P.R.I.D.E. to use any photographic image of my child taken while participating in the mentoring program. These images may be used in promotions or other related marketing materials. (Optional)
I understand I must return all of the following completed items along with this application, and that any incomplete information will result in the delay of my application being processed:

- Contact and Information Release Form
- Interest Survey Form

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

_____________________________              __________
Parent Signature                                                                 Date

Please return or mail this application and the items listed above to:

Your Child’s School

OR

P.R.I.D.E of Halifax Community College

Building 300, Room 303,
Weldon, N.C. 27890
Contact and Information Release
(School/Community Base)

Students Name: _______________________________ Date: ______________

Major: ____________________________________________

I hereby grant permission for P.R.I.D.E. Mentoring Program to make contact with my son and conduct a personal interview for the purposes of applying to be a mentee.

I authorize P.R.I.D.E. to obtain any needed information regarding my son, including academic and behavioral records and conversations with teachers, counselors, and administrative staff.

Further, I understand that basic information about my son will be anonymously (without names) shared with a prospective mentor(s) to aid in determining a suitable match. Once a mentor/mentee match is determined, me and my son’s identity and other relevant information will be shared with the mentor to the extent it aids in facilitating a successful match.

______________________________________________ Date

Parent/Guardian Signature

Address_________________________ City___________ State____ Zip____

Home Phone#___________________ Cell Phone #________________________
Contact and Information Release
(To Be Completed by HCC Student)

Students Name: ________________________________ Date: ________________

Major: ___________________________________________________________________

I hereby grant permission for P.R.I.D.E. Mentoring Program to conduct a personal
interview for the purposes of applying to be a mentee. P.R.I.D.E. may also make contact
my previous high school and review records in order to determine how to best assist me
in succeeding at Halifax Community College.

I authorize P.R.I.D.E. to obtain any needed information regarding my high school,
including academic and behavioral records and conversations with teachers, counselors,
and other administrative staff.

Further, I understand that basic information about me will be anonymous (without
names) shared with a prospective mentor(s) to aid in determining a suitable match. Once
a mentor/mentee match is determined, my identity and other relevant information will be
shared with the mentor to the extent it aids in facilitating a successful match.

__________________________________________________________________________

Student Signature Date

Address___________________________ City____________ State____ Zip____

Home Phone #________________________ Cell Phone #________________________
Mentee Interest Survey
(To Be Completed by HCC Student)

Please complete all the following. This survey will help P.R.I.D.E Mentoring Program know more about you and your interests and help us find a good match for you.

What are the most convenient times for you to meet with your mentor? Please check all that apply.

Weekdays: Morning: __ Lunchtime: __ Evenings: __ Weekends: __ Other: ____
Do you speak any languages other than English? If so, which languages?
What are some favorite things you like to do with other people?
What is your major at Halifax community college?
What are your goals while attending Halifax Community College?
What are your favorite subjects to read about?
What is one goal you have set for the future?
If you could learn something new, what would it be?
What person do you most admire and why?
Describe your ideal Saturday:

Please check all activities you are interested in:

<table>
<thead>
<tr>
<th>Biking</th>
<th>Camping</th>
<th>Science</th>
<th>Cooking</th>
<th>Library</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hiking</td>
<td>Boating</td>
<td>Music</td>
<td>Sports</td>
<td>Yoga</td>
</tr>
<tr>
<td>Golf</td>
<td>Swimming</td>
<td>Gardening</td>
<td>Parks</td>
<td>Movies</td>
</tr>
<tr>
<td>Fishing</td>
<td>Animals/Pets</td>
<td>Painting/Photos</td>
<td>Board Games</td>
<td>Shopping</td>
</tr>
</tbody>
</table>

List any other areas of special interest:
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentee Interview

Student’s Name: ___________________ Date: ___________________

Interviewed by: __________________________

I need to ask a number of questions about you that will help me in matching you with a mentor. Some of the questions are personal and I want you to know that what you tell me will be confidential, meaning I won’t tell your parents and other family members unless you give me permission. However, I am required to report anything that indicates you have done or may do harm to yourself or others. And some information, such as what you would like to do with a mentor or things you are interested in may be shared with a prospective mentor. Do you understand?

1. Why do you think you’d like to have a mentor?

2. What type of person would you like to be matched with?

3. Will you be able to fulfill the commitments of the program – four hours per month with weekly contact for one year?

4. Are you willing to attend an initial mentee training session and ongoing training/support sessions throughout the HCC academic school year after being matched?

5. One of the program requirements is to communicate with program staff once a month about your relationship with your mentor. Are you okay doing that?

6. What types of activities would you do with a mentor?

7. What hobbies or interests do you have?

8. How would you describe yourself?

9. How do you think friends and family members would describe you?

10. How do you like Halifax Community College?

11. How well are you doing at HCC?

12. Tell me about your friends.

13. Have you ever been arrested? If so, when and for what?

14. Do you currently use any alcohol, drugs, or tobacco?

15. Do you have any questions about the program I can answer for you?

Interviewer Comments:
MENTEE ASSESSMENT SUMMARY

Name: ___________________________  Date: _____________

<table>
<thead>
<tr>
<th>Screening Materials</th>
<th>Date Sent to Applicant</th>
<th>Date Item Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>School/ Referral (if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent Referral Letter (if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Written Application</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact and Information Release</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentee Interest Survey</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentee Interview</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acceptance/Rejection Letter</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Eligibility Criteria:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Eligibility Criteria</td>
</tr>
<tr>
<td>-----</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Attend Halifax Community College</td>
</tr>
<tr>
<td></td>
<td>Participant in the P.R.I.D.E. of Halifax Community College Program</td>
</tr>
<tr>
<td></td>
<td>Willing to adhere to program policies and procedures</td>
</tr>
<tr>
<td></td>
<td>Able to obtain permission and ongoing support for participation in the program</td>
</tr>
<tr>
<td></td>
<td>Agrees to a one-year commitment</td>
</tr>
<tr>
<td></td>
<td>Commits to four hours per month</td>
</tr>
<tr>
<td></td>
<td>Agrees to attend required training sessions</td>
</tr>
<tr>
<td></td>
<td>Completed screening procedure</td>
</tr>
<tr>
<td></td>
<td>Will communicate regularly with mentor program learning coach and discuss monthly meeting and activity information</td>
</tr>
</tbody>
</table>

Does the mentee applicant meet all eligibility criteria? Yes ______  No________

If no, please explain any mitigating circumstances.
P.R.I.D.E Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

General Assessment Areas:

<table>
<thead>
<tr>
<th>Assessment Area</th>
<th>Good</th>
<th>Okay</th>
<th>Needs Help</th>
<th>Poor</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motivation for being in program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hygiene habits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-esteem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parental support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Overall comments:

Recommendation:
Recommendation To Approve: Yes: _________ No: ____________
Reasons Why:

Approval:
Approved: Yes: _________ No: ________________
By: _________________________________
By: _________________________________
Date: ____________
February 27, 2010

Mr. Trying To Do Right
2343 Praying Lane
Help me Lord Heights, NC 27870

Re: Jeff Trying- To- Do-Right

Dear Ms. Trying-To-Do-Right,

We are excited to inform you of your son’s acceptance into the P.R.I.D.E. Mentoring Program. Our mentor program learning coach will contact you shortly after an appropriate match has been found for Jeff. We appreciate your assistance in this process and look forward to communicating with you in the future.

We encourage your participation in P.R.I.D.E.’s activities; please feel free to contact the mentor program learning coach with any questions or concerns.

Sincerely,

Michael Earl
Mentor Program Learning Coach
P.R.I.D.E. Mentoring Program
(252) 5360-5464
Mentee Rejection Letter

February 27, 2010

Pookie Dem
4321 Wrong Choice St.
Yea Right N.C. 27842

Re: BROTHER TRYING TO DO RIGHT

Dear Pookie Dem,

On behalf of the P.R.I.D.E Mentoring Program, I wanted to express my sincere thanks for your interest in our program. I understand that you have given a considerable amount of time to this process and we greatly appreciate your effort. Unfortunately, we are unable to accept your application to be a mentee in our program.

I would be happy to discuss our decision with you. Please feel free to call me with any questions.

Thanks again and we wish you and your child much success.

Sincerely,

Michael Earl
Mentor Program Learning Coach
P.R.I.D.E. Mentoring Program
(252) 5360-5464
**Mentee Contact Sheet**

Name of Mentee: ____________________________  Date of Birth: ______________

Parent/Guardian: _________________________________________________________

Home Phone: ________________  Parent Work Phone: ________________

E-mail: _________________________

Mentor Name: ___________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose/Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
P.R.I.D.E Mentoring Program PROCEDURE

Training Procedure

Steering/Community Approval Date: __________
Revision Date: __________

**General Training Procedures**

1. Each mentor and mentee must attend an initial training session prior to being matched as well as attend ongoing in-service support/training sessions during their involvement in the P.R.I.D.E Mentoring Program.

2. The mentor program learning coach has the lead role in managing training session logistics, developing curriculums and training materials, facilitating the session, and processing the training evaluation forms. Sessions should be conducted by the P.R.I.D.E staff along with outside experts, and mentors and mentees currently in the program.

3. Training evaluations forms will be distributed and collected following all training sessions.

4. A training manual and supporting materials will be developed and maintained separately from the policy and procedure manual by the mentor program learning coach. Training materials will be reviewed and updated based upon program and training evaluation feedback at least semi-annually.

**Initial Training Session**

1. After potential mentors and mentees have completed the screening process and been accepted to participate in the program, the mentor program learning coach will notify them of the next training times and schedule them to attend a training session. Two days prior to the training, the learning coaches will call to remind participants about the training.

2. Basic mentor and mentee training sessions will be held once a month alternating between the first _______ of the month from ____ to ____ and the first _______ of the month from ____ to _______.

3. Participants must complete the Training Completion Forms, which will be added to the right side of their case files.
4. Content for the initial training sessions must include basic program guidelines, safety issues, and communication/relationship building skills. Sexual abuse prevention training, in particular, is mandatory for both mentors and mentees.

5. A training completion certificate will be given to each participant at the end of their initial training session.

**In-service Training Sessions**

1. Once matched, each mentor and mentee must attend at least 6 out of 9 in-service support/training sessions during the course of the Halifax Community College Academic Calendar Year. Attendance at each session will be noted and dated on their file log sheet.

2. Mentor and mentee in-service support/training sessions will be offered monthly, alternating between Saturdays from 10 a.m. to 12 p.m. and Thursdays from 7 to 9 p.m.

3. Content for the in-service sessions will be determined based on feedback provided by mentors and mentees during the support meetings or based on feedback and suggestions from mentors and mentees. Topics may include themes such as communication strategies, understanding HCC student’s at-risk behaviors, goal setting, educational topics, and community referral services.

**Training Attendance Failure**

1. If a mentor or mentee schedules their attendance and fails to attend an Initial Training session twice without prior notification and good reason as deemed by the mentor program learning coach, he will not be accepted into the Mentoring Program.

2. If the mentor or mentee fails to attend the required number of in-service support/training sessions per year, the mentor or mentee will not be eligible to be matched again at the end of their existing mentoring relationship.

3. Failure to complete training sessions coupled with identified match problems may result in the match being terminated and may result in exclusion from future involvement in the P.R.I.D.E Mentoring Program.
Mentor Training Outline

Session Title: Making Mentoring Work!

The initial training/workshop is for all new mentors. The objectives of this training are intended to help new mentors:

- Develop a deeper understanding of mentor roles and expectations
- Learn strategies for effectively mentoring a HCC male student
- Understand clearly the P.R.I.D.E. Mentoring Program guidelines and policies that they must operate within as mentors

An agenda for a two-hour training workshop, and approximate times for each activity, will include the following:

1. **Icebreaker: Introductions** (15 minutes)

2. **Roles of a Mentor** (20 minutes)
   - Activity Ideas

3. **Trust and Relationship Building** (25 minutes)

**BREAK** (15 minutes)

4. **Safety Issues** (25 minutes)
   - Abuse Prevention
   - Mandatory Reporting
   - Sexual Harassment
   - Transportation Rules
   - Alcohol and Tobacco Use

5. **Other Important Program Guidelines** (20 minutes)
   - Parent Roles and Inclusion
   - Gifts and Money
   - Expected and Unacceptable Behaviors
   - Match Closure

6. **Wrap-Up – What’s Next?** (15 minutes)
   - Matching Process
   - Questions
Mentee Training Outline

Session Title: Mentoring Works!

The initial training workshop is an introductory for new mentees. The objectives of this training are intended to help new mentees:

- Develop a deeper understanding of their role as a mentee
- Know what to expect from a mentor and how working with a mentor can help them succeed in life
- Understand clearly the P.R.I.D.E. Mentoring Program guidelines and policies that they must operate within as mentees

An agenda for a two-hour training workshop, and approximate times for each activity, will include the following:

1. **Icebreaker: Introductions** (20 minutes)

2. **What is a mentor?** (20 minutes)
   - Activity Ideas

3. **Talking and Relating to Your Mentor** (25 minutes)
   
   BREAK (15 minutes)

4. **Safety Issues** (25 minutes)
   - Abuse Prevention
   - Mandatory Reporting
   - Sexual Harassment
   - Alcohol and Tobacco Use

5. **Other Important Program Guidelines** (20 minutes)
   - Parent Inclusion and Permission
   - Gifts and Money
   - Expected and Unacceptable Behaviors
   - Match Closure

6. **Wrap-Up – What’s Next?** (15 minutes)
   - Matching Process
   - Questions
Training Evaluation

1. What did you find to be *most* useful in this workshop?

2. What did you find to be *least* useful?

3. Was there anything you felt was missing from this session that you would have liked to learn more about?

4. In what other ways could we improve this session?

5. Please rate the following:

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Average</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effectiveness of trainer</td>
<td>1</td>
<td>2</td>
<td>3 4 5</td>
</tr>
<tr>
<td>Training room</td>
<td>1</td>
<td>2</td>
<td>3 4 5</td>
</tr>
<tr>
<td>Training content</td>
<td>1</td>
<td>2</td>
<td>3 4 5</td>
</tr>
<tr>
<td>Training activities</td>
<td>1</td>
<td>2</td>
<td>3 4 5</td>
</tr>
<tr>
<td>Training materials</td>
<td>1</td>
<td>2</td>
<td>3 4 5</td>
</tr>
<tr>
<td>Overall rating</td>
<td>1</td>
<td>2</td>
<td>3 4 5</td>
</tr>
</tbody>
</table>

6. List other topics or concerns you would like to have addressed in future training sessions.

7. Other comments:
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentoring Program
Training Completion Worksheet

Congratulations on completing your training and we look forward to working with you as a P.R.I.D.E. Mentor!

List three things you learned during this session that will help you when you begin your new role as a mentor. They can be skills, attitudes, or anything else. Then explain how you plan to use these in working with your mentee.

1.

2.

3.

This certifies that I have completed my initial training and that I fully understand and agree to follow the guidelines and requirements of being a mentor in the P.R.I.D.E. Mentoring Program.

__________________________________________  ________________
Mentor Signature                                      Date

__________________________________________
Print Name
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentoring Program
Mentee Training Completion Worksheet

Congratulations on completing your training and we look forward to working with you as a P.R.I.D.E. mentee!

List three things you learned during this session that will help you when you begin your new role as a mentee. They can be skills, attitudes, or anything else. Then explain how you plan to use these in working with your mentor.

1.

2.

3.

This certifies that I have completed my initial training and that I fully understand and agree to follow the guidelines and requirements of being a mentee in the P.R.I.D.E. Mentoring Program.

_________________________________  ______________________
Mentor Signature                  Date

_________________________________
Print Name
Matching Procedure

Steering Committee Approval Date: __________
Revision Date: __________

1. To begin the match process, the learning coach reviews the application, interview notes, and interest survey information of both the mentee and mentor to determine match suitability between a mentor and mentee. The greatest weight will be placed on the mentee preferences and needs. A match selection will be made using the match suitability criteria as a guide:
   - Preferences of the mentor, mentee, HCC staff, school staff and/or parent/guardian
   - Similar gender/ethnicity
   - Common interests
   - Compatibility of meeting times
   - Geographical proximity
   - Similar personalities

2. Once a potential match is identified, and prior to contacting any of the prospective participants, the learning coach must review the files of the potential mentor and mentee to ensure all screening procedures have been completed and both have met all the eligibility criteria. As this is determined, the mentor program learning coach fills out the Match Worksheet. A copy of the Match Worksheet will be placed in both the mentor and mentee files once a match is made.

3. The learning coach first contacts the prospective mentor and without using last names, describes and provides information about the mentee to determine if there is interest by the mentor.

4. Given initial interest by the mentor, the learning coach then provides the mentee or mentee's parent/guardian (if student is under the age of 18) with a description and information about the prospective mentor.

5. If both the mentor and/or the parent/guardian agree, the learning coach will then contact the mentee and describe the prospective mentor to them. The mentee is informed last so as to minimize disappointment if either the mentor and/or parent/guardian does not approve of the suggested match in some way.

6. Once both parties tentatively agree to the match, a time is scheduled for an introductory meeting. The learning coach facilitates this introductory meeting of the mentor, mentee, and/or parent/guardian. The learning coach should conduct the meeting by:
- Facilitating introductions
- Having the mentor take the lead in talking about his/her interests, hobbies, and why he/she wants to be a mentor, followed by the mentee doing the same
- Asking each party if they are interested in moving forward with the match

7. If anyone is uncertain, the parties may be given time to consider the match further.

8. If all agree to move forward with the match, match contracts must be completed and signed by all parties. Copies of all are given to each party.

9. The first mentor and mentee match meeting date and time should be confirmed. Telephone numbers and addresses can be exchanged at this time.

10. The parent/guardian must provide a copy of the students’ health insurance card or health insurance provider information to the mentor at this time.

11. Once the match is made, program staff will add the mentor/mentee name to the log sheet of the mentee/mentor files and schedule the first follow-up call to each person within the first week following their first meeting date.
P.R.I.D.E Match Worksheet
(To be completed by the Learning Coach)

Prospective Match Participants

Mentor: _______________________________________________________

Mentee: _______________________________________________________

Parent/Guardian (under 18):________________________________________

Match Criteria
Why you feel the match would be compatible and successful, considering the following match criteria:

- Preferences of the mentor, mentee, and/or parent/guardian
- Similar gender/ethnicity
- Common interests
- Compatibility of meeting times
- Geographical proximity
- Similar personalities

Other reasons for compatibility:

Any areas of concern:

Comments:

Note: Place copy in both mentor and mentee files.
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentor Contract

Name: ______________________________ Date: __________

By choosing to participate in the P.R.I.D.E. Mentoring Program, I agree to:

- Follow all rules and guidelines as outlined by the mentor program learning coach, mentor training, program policies, and this contract
- Be flexible and provide the necessary support and advice to help my mentee succeed
- Make a one-year commitment to being matched with my mentee
- Communicate at least 4 hours per month with my mentee i.e. text, e-mail, etc...
- Obtain mentee and/or parent/guardian permission for all meeting times at least three days in advance, if possible
- Be on time for scheduled meetings or call my mentee at least 24 hours beforehand if I am unable to make a meeting
- Submit monthly meeting times and activities to the learning coach, and regularly and openly communicate with the coach as requested
- Inform the learning coach of any difficulties or areas of concern that may arise in the relationship
- Keep any information that my mentee tells me confidential except as may cause him or others harm
- Always obey traffic laws when in the presence of my mentee.
- Never be in the presence of my mentee when I have or am consuming alcohol, or a controlled substances
- Participate in a closure process when that time comes
- Notify the program coordinator if I have any changes in address, phone number, or employment status
- Attend in-service mentor training sessions throughout the year

_________ (please initial) I understand that upon match closure, future contact with my mentee is beyond the scope of the P.R.I.D.E. Mentoring Program and may happen only by the mutual consensus of the mentor, the mentee, and/or parent/guardian.

I agree to follow all the above stipulations of this program as well as any other conditions as instructed by the program coordinator at this time or in the future.

(Signature) ______________________________ (Date) __________________________

P.R.I.D.E.
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentee Contract

Name: __________________________________________ Date: ____________

By choosing to participate in the P.R.I.D.E Mentoring Program, I agree to:

- Follow all rules and guidelines as outlined by the mentor program learning coach, mentee training, program policies, and this contract
- Have a positive attitude and be respectful of my mentor
- Make a one-year commitment to being matched with my mentor
- Obtain permission for all meeting times at least three days in advance, if possible
- Be on time for scheduled meetings or call my mentor at least 24 hours beforehand if I am unable to make a meeting
- Discuss monthly meeting times and activities with the mentor program learning coach, and regularly and openly communicate with the learning coach as requested
- Inform the learning coach of any difficulties or areas of concern that may arise in the relationship
- Participate in a closure process when that time comes
- Notify the learning coach if I have any changes in address or phone number
- Attend mentee training sessions

_______ (please initial) I understand that upon match closure, future contact with my mentor is beyond the scope of the P.R.I.D.E Mentoring Program and can happen only by the mutual consensus of the mentor, the mentee, and my parent/guardian.

I agree to follow all the above stipulations of this program as well as any other conditions as instructed by the program coordinator at this time or in the future.

__________________________________________   _______________________
(Signature)                                         (Date)
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E.
Parent/Guardian Contract
(School/Community Base)

Name: ___________________________________________ Date: ____________

By allowing my son to participate in the P.R.I.D.E. Mentoring Program, I agree to:

- Allow my son to participate in the P.R.I.D.E. Mentoring Program and to be matched with a P.R.I.D.E. mentor
- Follow and encourage my son to follow all rules and guidelines as outlined by the mentor program learning coach, mentee training, program policies, and this contract
- Support my son in this match by allowing him to meet with his mentor 1 hour per week contact with him/her for one year
- Regularly and openly communicate with the learning coach as requested
- Inform the learning coach if I observe any difficulties or have areas of concern that may arise in the match relationship

________ (please initial) I understand that upon match closure, future contact between my child and his/her mentor is beyond the scope of the P.R.I.D.E. Mentoring Program, and can happen only by the mutual consensus of the mentor, the mentee, and myself.

I agree to follow all the above stipulations of this program as well as any other conditions as instructed by the program coordinator at this time or in the future.

_________________________________________  (Signature)  __________ (Date)
SECTION 3. PROGRAM PROCEDURES

**P.R.I.D.E Mentoring Program PROCEDURE**

**Match Support and Supervision Procedure**

**Supervision**
1. Once matched, a learning coach will be assigned to support and monitor all parties to a given match including the mentor, mentee, school, business and/or parent/guardian.

2. The Learning Coach will add report logs to the right side of the respective case files in reference to professional, academic, community and one-on-one:
   - Mentor Report Log (mentor’s file)
   - Mentee Report Log (mentee’s file)
   - Parent/Guardian Report Log (mentee file)

3. Within one week of the first activity date of a new match, the Learning Coach will make phone/personal contact with all parties to determine how the first meeting went. At that time, they will make their first entries in the Report Logs in each file.

4. After this initial contact, the Learning Coach will then follow up monthly by phone with each party to gather information regarding meeting dates, times, activities, and how the match is proceeding. Three attempts to contact each party will be made in a given month before a written letter or note will be mailed requesting they call the mentor program learning coach.

5. The Learning Coach will supervise all school base mentorships while the mentor and mentee are meeting.

6. With each contact, information will be recorded on two forms in the case files:
   - **Mentor or Mentee Contact Sheets**: An entry will be made on the respective Mentor/Mentee Contact Sheet that supervision contact was made, noting if a Report Log was filled out, a message was left, or there was no answer. The respective Mentor/Mentee Contact Sheet should be completed each time a mentor, mentee, or parent/guardian makes contact even if outside monthly supervision times. (See mentor and mentee screening procedures for respective Contact Sheet forms.)
   - **Report Log**: Detailed information regarding the dates, times, activities, and progress of the match will be recorded on the respective Report Logs.

7. In order to assess how the match is proceeding, the Learning Coach may inquire about the following and/or probe beyond to uncover core issues:
   - Are they enjoying participating in the match?
   - How do they feel it is going?
   - Are they having any difficulties?
   - Is the relationship developing as they would like?
   - If not, why do they think it isn’t?
   - Are there any concerns or issues that should be addressed by program staff?
   - Do they need more support or any intervention?
Problem Resolution
1. If the Learning Coach assesses that there is a potential problem with the match, the learning coach will attempt to clarify the potential problem and work with the mentor, mentee, school, business, and/or parent/guardian to resolve the issue early.

2. The general process for resolving problems will follow the IDEAL model that includes:
   - **Identify** the problem and have a clear shared understanding of the problem between the mentor, mentee, and/or parent/guardian.
   - **Develop** alternative solutions that could address the problem.
   - **Evaluate** the strengths and weaknesses of each solution.
   - **Act** on the most constructive solution.
   - **Learn** from how the solution worked and repeat the IDEAL process if necessary.

3. When the match problem involves a lack of contact on the part of the mentor or mentee, the learning coach must investigate the reasons for lack of contact with the offending party, and make efforts to ensure the match is meeting according to the contracted amount of time per month.

4. If a problem area continues, the learning coach should consult with other learning coaches and/or community resources to define a viable approach to addressing the problem and proposing potential solutions.

5. If the problem cannot be resolved, formally closing the match may be necessary. At that time, it would be determined if either or both parties are suitable for matching with other partners.

6. All support and supervision by the P.R.I.D.E. staff must be recorded on the respective Mentor/Mentee Contact Sheets, referencing any notes included in the files.

Other Support
It is the responsibility of the learning coach to provide other support to the matches, including but not inclusive of the following:
- Plan and implement at least one group activity for mentor/mentee matches per quarter.
- Facilitate an ongoing support group for mentors that will meet bimonthly.
- Access community resources, including steering committee members and community advisory committee members contact information, to obtain and disseminate tickets to community events and activities for matches.
# Mentor Report Log

Name: ________________________________________________________________

<table>
<thead>
<tr>
<th>Contact Date</th>
<th>Meeting Dates</th>
<th>Activities</th>
<th>Comments and/or Areas of Concern</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Mentee Report Log

Name: ____________________________________________________________

<table>
<thead>
<tr>
<th>Contact Date</th>
<th>Meeting Dates</th>
<th>Activities</th>
<th>Comments and/or Areas of Concern</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Parent/Guardian Report Log

Name: ____________________________________________________________

<table>
<thead>
<tr>
<th>Contact Date</th>
<th>Meeting Dates</th>
<th>Activities</th>
<th>Comments and/or Areas of Concern</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
P.R.I.D.E. Mentoring Program PROCEDURE

Recognition Procedure

Steering Committee Approval Date: __________
Revision Date: __________

The following outlines required recognition activities for mentors in the P.R.I.D.E Mentoring Program. This procedure, however, does not limit recognition as a daily part of “business” or other activities that may be undertaken throughout the year.

1. Each mentor in the program will receive a personalized “participant” item sent by mail that recognizes their commitment and participation to the P.R.I.D.E. Mentoring Program. This item will be provided following their initial match, and updated and redistributed each year to coincide with their annual anniversary date.

2. Cards will also be sent to mentors during each December/New Year holiday season and for their birthday, with personal signatures from the P.R.I.D.E. staff.

3. Every year P.R.I.D.E. Mentoring Program will host a participant recognition event such as a picnic, dinner, or other activity. A mentor, mentee, business, school and parent/guardian of the year award will be presented. A committee including the learning coaches, the program director, the steering committee members and the community advisory committee members, will determine the award criteria and make final determinations based on recommendations from the learning coaches. Other acknowledgments will be made for length of service (mentors), recruitment of other mentors, best academic improvement (mentee), or other outstanding achievements. Recognition will include a certificate and a nominal gift determined by the committee and budget allowance. The learning coaches will lead the planning and implementation efforts with input assistance, and attendance of other learning coaches, the program director, and committee members.

4. Recognition for length of volunteer service includes:
   - At six months, a letter of appreciation will be sent to the mentor’s place of employment, recognizing the mentor’s commitment to the program.
   - After one year of service, all mentors will be sent a certificate of appreciation and a handwritten thank-you note or card.
   - At five years of service, engraved plaques will be presented for continuous service.
5. All awards and recognitions will be featured in the Halifax Community College and P.R.I.D.E Program newsletter and website; including, Participant of the Year awards, length of service recognitions, and any other outstanding service/performance acknowledgments. Participant of the Year awardees will be written up in a press release that will be distributed to local media.

6. Outstanding mentors may be asked to assist in presenting at new mentor orientation and training sessions by invitation of the learning overseeing the mentor program.
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentoring Program PROCEDURE

Mandatory Reporting of Child Abuse and Neglect Procedure

Steering Committee Approval Date: __________
Revision Date: __________

All P.R.I.D.E. staff, agency representatives, and volunteers must adhere to the following mandatory reporting procedures:

**Suspected Child Abuse or Neglect**

1. All suspected incidents of child abuse or neglect, recent or otherwise, must be reported to the learning coach immediately, the same day if possible.

2. They must fill out the Child Abuse and Neglect Report form detailing critical information about the alleged incident of abuse or neglect. Once completed and reported, this form will be kept in the mentee’s file folder.

3. The learning coach must then file a report with the County Department of Children and Family Services (DCFS) within 24 hours.

4. If knowledge of the suspected abuse or neglect occurs during non-business hours, the mentor must 1) contact the agency crisis staff on cell phone, or 2) make the report to the local community abuse hotline or directly to DCFS. The mentor must first attempt to contact a P.R.I.D.E. Program staff member. If unable to do so at the time, he/she must file a report with the program learning coach supervising the mentor program by noon the next business day. The learning coach supervising the mentor program must follow steps 1 and 2 above and follow up with the DCFS to ensure the report was adequately made by the mentor.

5. In some cases, the DCFS may require the mentor to be interviewed or make contact with them directly. In such cases, the learning coach supervising the mentor program will accompany the mentor as allowed by DCFS.
Suspected Child Abuse or Neglect by P.R.I.D.E. Program Staff or Volunteers
1. The same procedures outlined above will be followed for any suspected child abuse and neglect by any P.R.I.D.E. staff person, program representative, or volunteer.

2. In addition, the alleged abuser will be investigated by the P.R.I.D.E. Program steering committee and community advisory committee members.

3. During such an investigation, the alleged abuser will be immediately restricted from contact with the HCC student, placed on employment probation, terminated, or suspended from participation in the program.

4. In the case of suspicion of a mentor, the parent/guardian will be immediately informed of the suspicion.

Training
1. All P.R.I.D.E. Program staff, agency representatives, and volunteers must be trained on N.C. statutes of child abuse and neglect laws, and P.R.I.D.E.’s mandatory reporting policy and procedures prior to working with HCC students’ or participating in the P.R.I.D.E. Mentoring Program.

2. Reporting of child abuse and neglect is mandated by the training policy and procedure and is included as a required topic in the training curriculum outline for both mentors and mentees.
Child Abuse and Neglect Report

Date: __________

Person making report to P.R.I.D.E.: ________________________________________________

Relationship to the student: ________________________________________________________

Reported to: __________________________________ Date: __________

(DCFS Staff name)

Name of student: ___________________________________________ Age: _________

Address: ____________________________________________________________

City: __________________________ State: ____________ Zip: ______

Telephone: ____________________________

Parent/Guardian: ____________________________________________________________

Relationship to Child: _________________________________________________________

Name of person suspected of abuse or neglect: __________________________

Relationship to the child: _________________________________________________

Describe suspected abuse or neglect; include the nature and extent of the current injury, neglect, or sexual abuse to the student in question:

Describe if known, the circumstances leading to the suspicion that the student is a victim of abuse or neglect:

Describe, if known, any previous injuries, sexual abuse, or neglect experienced by this student or other children in this family situation and any previous action taken, if any.
P.R.I.D.E. Mentoring Program PROCEDURE

Closure Procedure

Steering Committee Approval Date: __________
Revision Date: __________

P.R.I.D.E. Mentoring Program staff members will follow the closure procedures as closely as possible and will vary based on the reasons for the match ending:

1. At the point it is decided that a match is closing, the learning coach will fill out a Match Closure Summary form and then supervise and instruct all participants through the closure process. A copy of the Match Closure Summary will be placed in both the mentor and mentee files.

2. All closures must be classified as to the reason for the match ending. The major classifications are as follows and the circumstances will dictate the procedure to be followed:

   **Planned**
   A planned closure is one that has been known about for a period of time such as three months or more. Common reasons for planning a match closure may include the match is reaching the end of the one-year commitment, the HCC student transfers or withdraws, and/or the goals of the match have been achieved.

   **Extenuating**
   Extenuating circumstances for match closure are usually more sudden in nature, and beyond the control of the program and/or its participants, i.e., relocation or moving away, or an unexpected personal crisis.

   **Difficult**
   A difficult match closure is due to relationship or behavioral difficulties, i.e., lack of cooperation or contact, parental disapproval, irreconcilable issues, lack of compatibility, and/or violations of program policies.

3. In all cases, attempts will be made to have a closure meeting to include P.R.I.D.E. staff, the mentor, and mentee. The parent/guardian may attend if he/she desires. The meeting agenda should cover the following, depending on the circumstances of closure:
   - Open discussion about the relationship ending
   - Complete the closure Exit Surveys
   - Discuss P.R.I.D.E.’s policies around future contact (see Closure Policy)
   - Distribute participant Closure Letters
4. In the absence of a meeting, the P.R.I.D.E. Program staff will attempt to contact all parties by phone to inform them the match is closing and how best to proceed in closing the match. Closure Letters and Exit Surveys will be mailed out to the mentor, mentee, and parent/guardian and will include self-addressed, stamped envelopes.

5. In all circumstances, the mentor, mentee, and parent/guardian should all receive a Closure Letter stipulating the match has formally ended and any future contact is beyond the scope and responsibility of P.R.I.D.E.

6. The P.R.I.D.E. Program staff must coordinate closure proceedings with evaluation requirements and assist in any way necessary to gather evaluation data during this process.

7. Copies of the Closure Letters and all completed Exit Surveys should be placed in the respective mentor or mentee files.

8. Depending on planned future participation in the program, the files of mentors and/or mentees exiting the program should be kept active or placed in the program archives.
## P.R.I.D.E.’s Match Closure Summary

Name of Mentee: _________________________________________________________

Name of Mentor: _________________________________________________________

Match Date: ____________ Closure Date: _________ Length of Match: _________

Please circle the circumstance and check the reason for match closure

<table>
<thead>
<tr>
<th>Planned</th>
<th>Mentor</th>
<th>Mentee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed one-year match</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other, specify:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Extenuating</th>
<th>Mentor</th>
<th>Mentee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relocation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Change</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time/Schedule Conflict</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family/Personal/Health Issues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other, specify:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Difficult</th>
<th>Mentor</th>
<th>Mentee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violation of Policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavioral Problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of Cooperation with P.R.I.D.E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent/Guardian Withdrew the Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lost Interest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other, specify:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional details concerning the closure:

Recommend rematch?  **Mentor:** □ Yes □ No  **Mentee:** □ Yes □ No

Completed by: ___________________________ Date: ____________

*Note: Place copy in both mentor and mentee files*
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E.
Mentor Exit Survey

Thank you for serving as a mentor in the P.R.I.D.E. Mentoring Program. Your efforts are greatly appreciated. We are always looking for ways to improve our program and appreciate your feedback. Please complete the following and return in the enclosed envelope.

Name: ________________________________________ Date: ________

Name of Mentee: __________________________________________

Length of Match: ___ years ___ months

Check what best describes your relationship with your mentee. Then please explain your answers below:

☐ Very close    ☐ Close  ☐ Not very close
☐ Very successful ☐ Successful ☐ Not very successful

Why is your match ending?

Do you feel like you made a difference in your mentee’s life? ☐ Yes ☐ No
Please explain below:

Did you feel you received adequate support and supervision from the P.R.I.D.E. Program staff?

What aspects of the P.R.I.D.E. Mentoring Program did you like the best?

What aspects of the P.R.I.D.E. Mentoring Program did you like the least?

What could we have done to make our program a better experience for you and/or your mentee?

Would you like to be rematched? ☐ Yes ☐ No

Please provide any additional comments:
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E.
Mentee Exit Survey

Thank you for being a mentee in the P.R.I.D.E. Mentoring Program. We hope you enjoyed being a mentee. We are always looking for ways to improve our program and appreciate your feedback. Please complete the following and return in the enclosed envelope.

Name: ___________________________________________ Date: _________

Name of Mentor: ____________________________________________

Length of Match: ___years ___months

Check what best describes your relationship with your mentor. Then please explain your answers below:

☐ Very close ☐ Close ☐ Not very close
☐ Very successful ☐ Successful ☐ Not very successful

Why is your match ending?

Do you feel like your mentor made a difference in your life? ☐ Yes ☐ No
Please explain below:

Did you feel you received adequate support and supervision from the P.R.I.D.E. Program staff?

What aspects of the P.R.I.D.E. Mentoring Program did you like the best?

What aspects of the P.R.I.D.E. Mentoring Program did you like the least?

What could we have done to make our program a better experience for you?

Would you like to be rematched? ☐ Yes ☐ No

Please provide any additional comments:
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E.
Parent/Guardian Exit Survey

Thank you for allowing your son to participate in the P.R.I.D.E. Mentoring Program. We hope your son benefited from having a mentor. We are always looking for ways to improve our program and appreciate your feedback. Please complete the following and return in the enclosed envelope.

Name:_________________________________________________________ Date:_______

Name of Student:_________________________________________________________

Name of Mentor:___________________________________________________________

Length of Match: ___ years ___ months

How would you describe your child’s relationship with his/her mentor? Please explain your answers below:

☐ Very close ☐ Close ☐ Not very close
☐ Very successful ☐ Successful ☐ Not very successful

Why did the match end?

Do you feel like your child’s mentor made a difference in his life? ☐ Yes ☐ No
Please explain below:

Did you feel you received adequate support and supervision from the P.R.I.D.E. Program staff?

What aspects of the P.R.I.D.E. Mentoring Program did you like the best?

What aspects of the P.R.I.D.E. Mentoring Program did you like the least?

What could we have done to make our program a better experience for you?

Would you allow your child to be rematched? ☐ Yes ☐ No

Please provide any additional comments:

P.R.I.D.E.
**Closure Letter**

P.R.I.D.E. of Halifax Community College  
P.R.I.D.E. Mentoring Program  
Bldg. 300, Rm. 303  
Weldon, N.C. 27890

*(Name of Mentor, Mentee, or Parent/Guardian)*  
*(Address)*

Dear *(first name)*,

This letter is to inform you that the mentoring relationship managed by the P.R.I.D.E. Mentoring Program has officially ended as of *(match end date)*.

*(Optional if applicable)* We have made attempts to contact you via phone and e-mail to no avail and regret that we are unable to meet with you and go through a formal closure process.

As the match has formally ended, P.R.I.D.E. no longer assumes responsibility for monitoring and supervising the match and your file will be placed on an inactive status. Thus, any future contact between match partners is at the sole discretion of all parties involved (mentor, mentee, and/or parent/guardian). Any incidents occurring due to future contact among match participants is beyond the scope and responsibility of P.R.I.D.E.

Thank you for your involvement in the P.R.I.D.E. Mentoring Program.

Please feel free to contact me if you have any questions.

Sincerely,

Michael Earl  
Learning Coach,  
Supervising P.R.I.D.E. Mentoring Program
P.R.I.D.E. Mentoring Program Policy and Procedure Manual

SECTION 3. PROGRAM PROCEDURES

P.R.I.D.E. Mentoring Program PROCEDURE

Evaluation Procedure

Steering Committee Approval Date: __________
Revision Date: __________

1. An agreement with the P.R.I.D.E. Program and Halifax Community College in which data and recommendations will be provided on HCC students grades, attendance, effort, and any other relevant data that may assist in the student evaluation.

2. The P.R.I.D.E. Program staff will be responsible for overseeing Halifax Community College’s efforts in providing data along with collecting the evaluation data from mentors, mentees and their parents/guardians.

3. Mentee evaluation data will be collected at the end of each six months of participation in the program. Confidential surveys will be mailed to mentees and their parents/guardians to be returned directly to P.R.I.D.E.

4. Data will be tabulated, evaluated, and compiled into reports at the end of each quarter for those participants reporting that quarter.

5. P.R.I.D.E. staff will meet quarterly to review the data and make program modification accordingly.