

**Project YES  
Teen Mentoring Program  
Policy and Procedure Manual**

**January 23 2007**

# Section 1. Organization Background

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## **Program History**

Project YES, a non-profit organization, was founded in 1997. Project YES is a division of Agudath Israel, an organization whose mission is to address the problems facing American and international Jewry as individuals and as a nation. To achieve these aims, Agudath Israel of America maintains nineteen divisions focused on activities embracing every phase of Jewish life. Their efforts affect the lives of many thousands of Jews of all ages on a daily basis.

The genesis of Project YES was in a speech given by its founder,, Rabbi Yaakov Horowitz, to the attendees at a 5,000- person convention sponsored by the Agudath Israel of America Community Services organization. In his speech, Rabbi Horowitz spoke about the growing problem of troubled Jewish teenagers and their entry into anti-social behavior. Whereas the problem had largely been kept private within individual homes and schools, Rabbi Horowitz recommended bringing the issue to the forefront of the community's consciousness and addressing the problem proactively. As a result of the response to his speech, Rabbi Horowitz and Agudath Israel founded the Project YES teen mentoring program.

Since opening its doors, Project YES has served over 400 youth through its one-on-one teen mentoring program. The teen mentoring staffs continue to carry out the vision of Project YES in the New York metropolitan area, Detroit, Chicago, and New Jersey. The program continues to expand its community-based services to pre-risk youth to other communities within the United States.

## **Mission Statement**

The Project YES Teen Mentoring Program's mission is to provide pre-at-risk children with support and guidance. Project Yes serves as a source of inspiration to teens who are failing in school, have low self esteem, have social deficiencies, or may be experimenting outside their families' value systems. Our goal is to provide these children with an additional stable adult figure in their lives. The presence of a caring mentor has been shown to provide support, boost self-esteem, assist in enhancing social skills, and help the child acquire a greater commitment to academic success.

## **Section 2. Program Policies**

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## Eligibility Policy

It is the policy of the Project YES Mentoring Program that each participant must meet the defined eligibility criteria. Mentoring staff should be knowledgeable of and understand all eligibility criteria required for mentor and mentee participation in the program.

Extenuating circumstances may be reviewed at the discretion of the program coordinator and acceptance may then be allowed with the written approval of the executive director.

### Mentor Eligibility Requirements

#### A mentor must:

- Be at least 18 years of age.
- Can be male or female, single or married
- Reside in the servicing areas (NY, NJ, MI, IL)
- Be willing to adhere to all Project YES Mentoring Program policies and procedures.
- Agree to a one-year commitment
- Commit to spending one hour per week with the mentee
- Be willing to communicate regularly with the program coordinator and submit weekly mentoring report forms
- Have access to an automobile or reliable transportation
- Have a current driver's license, auto insurance, and good driving record if driving the mentee
- Have a clean criminal history
- Have never been accused, arrested, charged, or convicted of child abuse or molestation
- *Not be a convicted felon. If the applicant has been convicted of a felony then they may be considered only after a period of seven years with demonstrated good behavior and an appropriate and corrective attitude regarding past behaviors.*
- Not be a user of illicit drugs
- Not use alcohol or controlled substances in an excessive or inappropriate manner
- Not currently be in treatment for substance abuse. If a substance abuse problem has occurred in the past the applicant must have completed a non-addictive period of at least five years
- Not have falsified information during the course of the screening process
- Complete the screening process:
  - Complete written application
  - Attend two and a half hour training
  - Complete one to two personal interviews
  - Provide two personal references
  - *Check driving record and gain copy of current insurance coverage.*
  - *Check criminal history: state criminal history, child abuse registry, sexual offender register. Same checks must be performed in all states resided in as an adult.*

## **Mentee Eligibility Requirements**

### **A mentee must:**

- Be 10-21 years old
- May be male or female
- Reside in the servicing areas
- Demonstrate a desire to participate in the program and be willing to abide by all Project YES Mentoring Program policies and procedures
- Be able to obtain parental/guardian permission to participate in the program
- Agree to a one-year commitment to the program
- Commit to spending a minimum of one hour a week with the mentor
- Complete the screening procedure
- Must not be diagnosed with severe psychosis, abusing drugs or alcohol, or be a threat to self and/or others. Such persons will be referred to other agencies

## **Screening Process**

It is the policy of the Project YES Mentoring Program that each mentor and mentee applicant undergo a screening procedure as a condition for being accepted into the program. All staff members who are involved in screening activities must be trained on the screening procedures and required to carefully follow those 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

### **Mentee Screening Procedures**

- Complete parent/guardian written intake
- Complete parent/guardian in person intake

The decision to accept an applicant into the program will be based upon a final assessment done by program staff at the completion of the mentor or mentee screening procedure. The program coordinator has final approval for an applicant's acceptance into the program. The administration of PYES reserves the right to reject mentor applicants for any reason or concern, including those not listed in the aforementioned eligibility requirements, without detailing those reasons.

All mentors are expected to meet the eligibility criteria. However, under extenuating circumstances, these criteria may be relaxed at the discretion of the program coordinator and acceptance may then be allowed with the written approval of the executive director.

Documentation of the screening process must be maintained for each applicant and placed in confidential files.

## **Recruitment Policy**

It is the policy of the Project YES Mentoring Program that there will be ongoing recruitment of new mentors. The number of mentors needed will be directly related to the number of mentees waiting to be matched.

At the end of each year, the teen mentoring staff will collect and review data of current mentors to explore the retention and/or attrition of volunteers. Attrition may be the result of changes in mentor availability due to marriage, employment, relocation, or schedule conflicts; mentor burnout and unwillingness to continue; or removal of mentors for violations or for ineffectiveness. The staff will use this information to guide further recruitment efforts.

## **Training Policy**

It is the policy of the Project YES Mentoring Program that all mentors attend a minimum two and a half hour initial training session prior to being matched.

It is the responsibility of the program coordinator to plan, develop, and deliver all training sessions with assistance from other Project YES staff, board members, and volunteers.

## **Matching Policy**

It is the policy of the Project YES Mentoring Program that the program coordinator will follow the guidelines outlined in the match procedure prior to creating a mentor/mentee match. Matches will be based on match suitability criteria as stated in the Match Procedure. Mentees will be matched with prospective mentors when available. The program coordinator should use the matching procedure to determine the suitability of a mentor/mentee match.

## **Match Support and Supervision Policy**

It is the policy of the Project YES Mentoring Program that mentors will complete and submit weekly report forms to Project YES regardless of whether they met with the mentee. Mentoring staff will make monthly phone or personal contact with the mentors. In the case of match difficulties, discord, or concerns, appropriate discussion and intervention will be undertaken to improve or rectify problem areas. Mentoring program staff must follow the steps outlined in the Match Support and Supervision Procedure.

## Record Keeping Policy

It is the policy of the Project YES Mentoring Program that each step of the mentoring application and match process be documented by creating an electronic 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 seven years after the close of their participation in the program. After seven years, the records will be shredded and discarded with approval from the executive director and destroyed only by approved individuals.

The program coordinator must keep stringent records of all program activities, utilizing approved forms. All files will be regularly maintained and updated within the electronic database by Project YES staff.

The creation of new forms or the revision of existing forms must be documented and kept within the Policy and Procedure Manual.

## Confidentiality Policy

It is the policy of the Project YES Mentoring Program to protect the confidentiality of its participants and their families. With the exceptions of the limitations listed below, program staff will only share information about mentees, their families, and mentors, with other Project YES professional staff. Further, all prospective mentors, mentees and parents/guardians should be informed of the scope and limitations of confidentiality by program staff. Additionally, mentors are required to keep information about their mentee and his/her family confidential from everyone except Project YES staff.

In order for Project YES to provide a responsible and professional service to participants, it is necessary to ask mentors, mentees, parents/guardians, and other outside sources **not** to divulge extensive personal information about the prospective participants and their families, including:

- Information gained from mentors and mentees, written or otherwise, about themselves, and/or their families, in application to and during program participation
- Participant's names and images gained from participants themselves, program meetings, training sessions, and other events
- Information gained about participants from outside sources including confidential references, school staff, and employers

### **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, or parents/guardians.
- Identifying information (including names, photographs, videos, etc.) of program participants may be used in agency publications or promotional materials only upon written consent of the mentor, mentee, and/or parent/guardian.
- Information may only be provided to law enforcement officials or the courts pursuant to a valid and enforceable subpoena.
- Information may be provided to legal counsel in the event of litigation or potential litigation involving Project YES. Such information is considered privileged information, and its confidentiality is protected by law.
- Program staff are mandatory reporters and as such must disclose information indicating that a mentor or mentee may be dangerous to or intends to harm him/herself or others.
- If program staff receives information at any point in the match process that a volunteer is using illegal substances, there is current criminal activity of any kind, or is inappropriately using alcohol or other controlled substances, the information will be shared with the parent and they will be referred out to an appropriate agency. The existing match will be closed.
- At the time a mentor and mentee are considered match candidates, information is shared between the prospective match parties. Each party shall have the right to refuse the proposed match based on the information provided to them. The information to be shared may include:
  - Mentor: age, sex, religious background, interests, hobbies, employment, marriage or family status and a summary of why the individual was chosen for the particular match.
  - Mentee: age, sex, religious background, interests, hobbies, family situation, living situation, a summary of the client’s needs assessment and expectations for match participation

### **Safekeeping of Confidential Records**

Each staff member will be provided with security access to confidential information based on their level of security.

### **Requesting Confidential Information From Other Agencies**

A mentee’s or volunteer’s right to privacy shall be respected by Project YES. Requests for confidential information from other organizations or persons shall be accompanied by a signed release from the mentor, mentee, and/or parent/guardian.

### **Violations of Confidentiality**

A known violation of Project YES policy on confidentiality by a program participant may result in a written warning or disciplinary action such as suspension or termination from the program.

## Transportation Policy

It is the policy of the Project YES Mentoring Program to allow mentors to transport mentees in their own private vehicles. The program coordinator must ensure that all mentors who will be driving their mentees meet the following criteria prior to transporting the mentee:

- All mentors must own a car or have access to *reliable* insured transportation.
- 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 undergo a driving check and have a clean driving record for the last three years. In the event that the mentor does not have a clean record parents/guardians will be notified of any current infractions.
- Project YES requires that mentors obey all traffic laws, and use seat belts and headlights at all times. Children under the age of 15 are mandated to sit in the back seat.
- Mentors must also avoid taking medications 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 program coordinator promptly.
- *The mentor must carry a copy of the mentee's health insurance information in the transporting automobile at all times in case of emergency.*

If any of the above policy is not adhered to, the mentor will not be allowed to transport the mentee in a private automobile.

## Overnight Visits Policy

It is the policy of the Project YES Mentoring Program to encourage mentor/mentee visits within their own community. Overnight visits and out-of-town trips are permitted under the following conditions:

- Overnight visits are only permitted after six month participation with a match.
  - Between six months and one year, overnight visits may occur only with approval from both the program coordinator and parent/guardian.
  - After one year, overnight visits may occur with permission of the parent only. All parties must report all such occurrences during their contact with mentoring staff, the nature of the activity, and the purpose.

## Mandatory Reporting Policy

It is the policy of the Project YES Mentoring Program that all clinical staff must report any *suspected* child abuse and/or neglect of the Project YES clients of program participants immediately. All such suspected reports must be made to appropriate state and/or local authorities. Program staff must follow the mandatory reporting of child abuse and neglect procedure.

Any mentors accused of child abuse or neglect will be investigated by Project YES. Contact with program youth will be restricted or constrained and/or the person in question suspended from program participation per the decision of the executive director and board of directors until such investigation is concluded.

## **Use of Alcohol, Drugs, and Firearms Policy**

It is the policy of the Project YES 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 program coordinator.

**Alcoholic Beverages:** No participant of the Project YES 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 youth do not consume any alcohol, excluding religious ceremonies.

**Drugs:** No participant of the Project YES Mentoring Program will manufacture, possess, distribute, or use any illegal substances while engaged in mentoring or otherwise.

**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 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**

It is the policy of the Project YES 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 is in no way intended to replace or take precedence over other policies or procedures including, but not limited to, the following:

- Confidentiality Policy
- Transportation Policy
- Overnight Visits 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 the Project YES Mentoring Program goals, values, and programs 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 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 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
- Acting in a manner that is deemed dangerous to the public (e.g. getting out of the car in middle of traffic, walking away from mentor into the street, etc)

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.

## **Closure Policy**

It is the policy of Project YES 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. 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 in one or both of the match partner's lives, 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, and/or program coordinator. It is left to the discretion of the program coordinator whether the individual will be reassigned to another match in the future based upon past participation performance and current goals and needs of the program.

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 and receive ongoing support and supervision. Future contact will be at the mutual and informal agreement of the mentor, the mentee and parent/guardian. If future contact is agreed upon, the Project YES Mentoring Program will continue to monitor and support the match. Once the year has been completed, all ongoing relationships must continue under the auspices of Project YES.

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## Mentor Inquiry Procedure

All persons inquiring to be mentors must speak directly to mentoring program staff. If program staff members are unavailable, other Project YES staff should courteously take a message and inform inquirers they will be contacted shortly. Program staff must follow the inquiry procedure as outlined below:

1. All prospective mentor inquiries will be recorded in the Volunteer Inquiry Tracking Log. This log will contain date of inquiry, name of prospective mentor, phone number, address, email address and how they were referred.
2. Program staff is to provide a verbal overview of the program to all phone and in-person inquiries
  - Overview of the program and program purpose
  - Time and duration commitments
  - Overview of screening requirements
  - Training requirements
  - Inform them that next step would be to attend a training session
3. All prospective mentors requesting to learn more or wanting to attend the training will receive the Teen Mentor Volunteer Application and the Teen Mentor Application Process either by fax, mail or e-mail.
4. After prospective mentors submit an application and attend the Training Session, the Project YES staff will complete the Screening Procedure for those who are interested and willing to make the required commitment.

## **Mentor Screening Procedure**

In accordance with the Project YES Mentoring Program screening policy, the mentoring program staff should complete the steps below to determine the suitability of the mentor.

1. The applicant must complete and return the volunteer application.
2. A mentor file on the Volunteer Database should be created for all prospective mentors. As each component of the screening process is completed, the information on the database will be updated.
3. The mentor must attend the two and a half hour volunteer training session.
4. Mentoring program staff members do the following:
  - Schedule an appointment and conduct one or two in-person interviews with the prospective mentor. Volunteers have a right to refuse to answer some of the questions. However, this can affect their acceptance to the program.
  - Conduct phone interviews with two personal references.
  - Process the sexual offender registry, DMV and criminal record checks.
5. Based on all information gathered above, staff will make a determination as to the appropriateness of the participant's involvement in the program.
6. An acceptance or rejection letter will be sent to the applicant based on the overall assessment of appropriateness.

# Project Y.E.S. Teen Mentor Application

Name: \_\_\_\_\_ Legal Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Ext: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Evening Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

## PLEASE COMPLETE BOTH PAGES AND SIGN:

### **Personal Information:**

Age: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Number of Children \_\_\_\_\_  
Describe your affiliation: *Chassidic* *Heimish* *Yeshivish* *Orthodox*  
*Lubavitch* *Modern Orthodox* *Other:* \_\_\_\_\_

Shul Affiliation(s): \_\_\_\_\_

Tell us about any hobbies or special interests that you may have:

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### **Education/Experience:**

High School: \_\_\_\_\_ Post High School: \_\_\_\_\_  
Employer: \_\_\_\_\_ Current Occupation: \_\_\_\_\_  
*Full Time* *Part Time*

### **Biography:**

Please describe yourself briefly and your motivation for joining this program.

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How long have you resided in your current home? \_\_\_\_\_

Provide all addresses (address, city, state, zip) of places of residence as an adult:

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I am able to mentor in the following areas: (check all that apply)

*Borough Park*      *Flatbush*      *Lower Manhattan*      *Midtown Manhattan*  
*Upper Manhattan*      *Crown Heights*      *Five Towns*      *Queens's*  
*Lakewood*      *Monsey*      *Other:* \_\_\_\_\_

What or who moved you to volunteer as a teen mentor? (check all that apply)

*Friend*      *Advertisement (please specify)*      *Article*      *Current Project*      *Y.E.S. volunteers*  
*Rov*      *Agudah Convention*      *Other:* \_\_\_\_\_

**References: 2 Required**

Please list the names, addresses and daytime telephone numbers of two (2) persons (non-family members) who have known you for at least five (5) years either personally or professionally.

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Please provide us with one of the following: (Required)

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

NYS Driver's License # \_\_\_\_\_

Birth Date (Month/Day/Year) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are you confident that you can make a commitment to spend *one hour per week* for at least one year with a child/teen on a regularly scheduled basis?    YES    NO

If matched, will you be able to meet our requirement of supervision (weekly short report and telephone contact with a staff member)?    YES    NO

I understand that I will be working with or in the vicinity of minor children. I understand and hereby authorize any background checks to be performed from one or more private/public sources and/or agencies to determine my suitability for this role. I understand that all information disclosed by background checks will not be shared with me by Agudath Israel of America Community Services, Inc., shall be used solely for the purpose of volunteer screening and shall not be disclosed to other persons or institutions unless authorized by law.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

# Teen Mentor Interview # 1

Volunteer Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Intake Counselor: \_\_\_\_\_  
Time availability: \_\_\_\_\_  
Traveling: \_\_\_\_\_  
Age Preference: \_\_\_\_\_

**Please be aware that Project Y.E.S. will attempt to secure information about you from various sources in order to ensure your suitability as a mentor. These sources include, but are not limited to: references you provided, NYS sex offender registry and DMV.**

## VOLUNTEER MOTIVATION AND PROGRAM KNOWLEDGE

1. Please explain your knowledge and understanding of the Teen Mentoring Program.  
\_\_\_\_\_  
\_\_\_\_\_
2. What prompted your interest in becoming a Teen Mentor and why now?  
\_\_\_\_\_  
\_\_\_\_\_
3. What experiences do you have working with teens?  
\_\_\_\_\_  
\_\_\_\_\_
4. What are your hobbies, and interests, and how you use your free time (leisure time)?  
\_\_\_\_\_  
\_\_\_\_\_

## FAMILY

1. Tell me about your family:  
\_\_\_\_\_  
\_\_\_\_\_

Where did you grow up?  
\_\_\_\_\_  
\_\_\_\_\_

Religious background:  
\_\_\_\_\_  
\_\_\_\_\_

Family constellation:  
\_\_\_\_\_  
\_\_\_\_\_

Relationship with each family member:  
\_\_\_\_\_  
\_\_\_\_\_

If you have children, discuss parenting role. Discuss parent's parenting role.  
\_\_\_\_\_  
\_\_\_\_\_

2. Was there any personal family crisis that we might be interested in being informed about?  
\_\_\_\_\_
3. Where you ever physically abused? \_\_\_\_\_ emotionally abused? \_\_\_\_\_ sexually abused? \_\_\_\_\_  
if yes, explain:  
\_\_\_\_\_  
\_\_\_\_\_

## SCHOOL AND EMPLOYMENT

1. Are you currently enrolled in school or do you have plans to return to school. If yes, when?  
\_\_\_\_\_

2. Are you planning to relocate or change jobs within the next year? Yes/ No

**HEALTH/MENTAL HEALTH**

1. Have you had any major injuries or illness from birth to the present?  
\_\_\_\_\_
2. Is there anything regarding your current health that would limit your participation in the program?  
\_\_\_\_\_
3. Do you regularly take any medications or prescription drugs? For what? Who prescribes it? How long?  
\_\_\_\_\_
5. Have you ever been in therapy? Please explain. Have you ever taken psychotropic meds?  
\_\_\_\_\_

**DRIVING RECORD**

1. Do you plan to drive your LB/LS? Y/N
2. How long have you had your driver's license for? \_\_\_\_\_
3. Has your driver's license ever been suspended or revoked? Y/N
4. Have you ever been responsible for any MV accident? Y/N  
If yes, describe:  
\_\_\_\_\_

5. *Have you received any tickets other than parking tickets?*  
\_\_\_\_\_

**POLICE CHECK**

1. Were you ever arrested as a child? Yes/No  
If yes, do you have a J.V. record? Yes/No  
Explain charge, reason and approximate date(s).  
\_\_\_\_\_  
\_\_\_\_\_
2. Have you ever been arrested as an adult? Were you convicted? What was the disposition? Explain charge, reason and date(s)  
\_\_\_\_\_  
\_\_\_\_\_
3. Have you ever been accused of a crime?  
\_\_\_\_\_

**SELF-APPRAISAL**

1. What difficulties can you anticipate in a match with a child or teen?  
\_\_\_\_\_  
\_\_\_\_\_
2. What activities would you anticipate doing with a teen?  
\_\_\_\_\_

PLEASE TAKE PICTURE OF VOLUNTEER

**Interviewer's Observations and recommendations:**

\_\_\_\_\_  
\_\_\_\_\_

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Warm	5	4	3	2	1	Cold
Sensitive	5	4	3	2	1	Insensitive
Outgoing	5	4	3	2	1	Reserved
Open	5	4	3	2	1	Closed
Well kempt	5	4	3	2	1	Disheveled

## Teen Mentor Interview # 2

Volunteer Name: \_\_\_\_\_

Date: \_\_\_\_\_

Intake Counselor: \_\_\_\_\_

1. Why do you want to do this work?

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2. What do you think will be difficult for you?

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3. What have you learned in the course of the training?

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4. What do you disagree with, or have a problem with?

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5. Are you ready to make the time commitment?

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6. Do you have any question about the process?

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7. How would you describe your personality?

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Interviewer's observations and recommendations:

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## Questions for Personal Reference

Date: \_\_\_\_\_ PYES staff: \_\_\_\_\_

Name of Volunteer: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

1) How long have you know this applicant and in what capacity (friend, business associate, Rabbi)?

2) How close is your relationship (how often do you see each other, quality of relationship)?

3) Do you feel this person possesses a genuine interest in others, especially young people? What is this person's capacity for caring and warmth?

4) Is this person's character such that he/she would be a desirable role model for a young person?

5) Please describe this person's temperament.

6) Would you have this person spend time with your children?

7) Do you have any extra comments pertaining to this person's acceptance as a volunteer?

If reference does not want to comment, please note reason.

## **Volunteer Acceptance Letter**

October 30, 2006

Dear Sara,

Congratulations! We welcome you as the newest member of our volunteer corps at Project Y.E.S. I hope you will find this experience to be rewarding and enjoyable.

It is our mission to create well-matched relationships. Please try to understand that it takes time to create a successful match and we appreciate your patience during this process.

We look forward to working with you. If you have any questions, please contact us at 718-758-3131. Thank you.

Sincerely yours,

Esther Gross, MS, CRC  
Director of Mentoring  
Project YES

## Volunteer Rejection Letter

November 2, 2006

Dear Sara,

Thank you for your recent application to become a volunteer with our project. While I greatly appreciate your motivation and the time you spent during our application process, I regret to inform you that we cannot fulfill your interest in volunteering with our program.

There are many other satisfying volunteer opportunities in our area that you may choose to pursue.

Thank you for your time and interest in Project Y.E.S. You have my best wishes in the future.

Sincerely,

Esther Gross, MS, CRC  
Director of Mentoring  
Project YES

## Recruitment Procedures

1. All new staff members receive training on the principles of volunteer recruitment and are required to understand the mentoring program's recruitment plan.
2. The director of recruiting will complete a detailed Quarterly Recruitment Activity Plan of specific tasks, roles and responsibilities, and a week-by-week timeline, incorporating other staff, the Executive Director, and advisory board members to implement specific recruitment activities. This activity plan must be reviewed and approved by the Executive Director and/or advisory board prior to implementation.
3. The program recruiter is responsible for ensuring implementation of the Annual and Quarterly Recruitment Activity Plans
4. Efforts will be made to hold a recruitment plan review and planning meeting quarterly prior to development of the next quarter's plan. This meeting will include the director of recruiting, program coordinator and executive director, as well as other program staff or other of concern.
5. A Volunteer Inquiry Tracking Log, containing names of potential recruits, will be updated as needed by program staff. On a bi-annual basis, The Director of Recruiting will inform the executive director about how many names are on the Volunteer Inquiry Tracking Log and how many successful matches have been made.
6. The executive director will provide the yearly budget for recruitment of new volunteers and marketing activities.
7. Based on tracking data and the overall effectiveness of the recruiting efforts, staff will revise the strategy as needed.

# **Mentor Job Description**

## **Mentor Role**

- Take the lead in supporting a young person through an ongoing, one-to-one relationship
- Serve as a positive role model and friend
- Build the relationship by planning and participating in activities together
- Strive for mutual respect
- Build the young person's self-esteem and motivation

The mentor training provides the tools necessary to fulfill the mentor role as envisioned.

## **Application and Screening Process**

- Written application
- Criminal history check
- Sexual offender registry check
- Personal interview
- Provision of two personal references
- Attendance at two and half hour mentor training.

## **Participation Requirements**

- Be at least 18 years old
- Be willing to adhere to all program policies and procedures
- Complete the application and screening process
- Be dependable and consistent in meeting time commitments
- Communicate bi-monthly with program staff and submit weekly report forms
- Accept constructive feedback regarding mentoring activities
- Have a clean criminal history
- Not use illicit drugs, alcohol or controlled substances
- Not currently be in treatment for substance abuse
- If a previous substance abuser, must have had a non-addictive period of at least five years
- Not have been hospitalized for mental disorder in the past three years.
- Be a friend, confidant

## **Desirable Qualities**

- Interest in working with young people
- Willing listener
- Encouraging and supportive
- Patient and flexible
- Tolerant and open-minded of mentees views and ideas

## **Time Commitment**

- Make a one-year commitment
- Spend one hour a week with a mentee
- Communicate with the mentee weekly
- Attend an initial two and half hour training session
- Attend mentor group events, mentor group supervision, and program recognition events.

**Benefits to the Mentor**

- Personal fulfillment through contribution to community and individual
- Satisfaction in helping someone mature, progress and achieve goals
- Training sessions and group activities
- Participation in a mentor support group
- Personal ongoing support and supervision to help the match succeed
- Mentee group activities and participant recognition events.

## **Mentor Training Procedure**

1. Each mentor must attend a two and a half hour training session prior to being matched.
2. The program coordinator has the lead role in managing session logistics, developing curriculums and training materials, and processing the training evaluation forms.
3. After potential mentors have shown interest in volunteering, they will be put on a list to be called for the next training session. Project YES staff will notify them of the next training times and schedule them to attend the training session. They will also try to schedule the volunteer interview prior to the training session.
4. Training sessions will be held once a month on either Monday, Tuesday, or Wednesday from 6:30-9:00 p.m.
5. Contents of the training session must cover basic program guidelines, safety issues (including mandatory reporting), and communication/relationship building skills. A training packet reviewing this material should be given out to the volunteers.
6. Training evaluations forms will be distributed and collected following each training session for the purpose of evaluating/improving the content of the trainings and trainer performance.

## **Teen Mentor Training Outline (Note form)**

### **Introduce presenter and Learners**

Name

Why I am Here

### **Project YES Range of Services**

- TM- Modeled after Big Brother/Big Sister program. 1 hour per week for 1 year. Mentor teens and pre-teens (10-21)
- PM-Parent Mentoring- Trained Volunteers that are supervised. Help parents succeed as parents and help their children succeed at what may be hard for them. 12 sessions of 1 hour each. Preferably 1 mentor with two parents.
- Keshet School Program- support for teachers and administrators to help them with challenges with a child or group of children not succeeding in class. Guidance for them to deal with children
- Telephone Advice- for people in areas where our programs are not available. This may include parents, teachers, teens etc.
- Referrals- Callers to Project YES who require a higher level of intervention, such as at-risk teens
- Career Counseling- Our only fee-based service (on a sliding scale). Helps yeshiva and kollel students identify strengths and interests to choose a career path that would be a good fit and make them comfortable. Not job placement

### **Highlights of the TM Program**

#### Population

- Ages 10-21

#### Range of religious orientation

- From modern to chassidish - “off the derech” are included but those considered “at risk” (drugs, sex, alcohol) are considered “out of scope”

#### Scope of presenting problem

- Poor social skills/child not succeeding
- Behavior and social issues in school
- Sibling conflict
- Social isolation

#### Risk Factors

- Recent immigrants

- Single parent households
- Dysfunctional households
- Large families
- Step-families
- Dual income families (both parents working)

#### Out of Scope

- Severe psychiatric diagnosis
- Ongoing drug/alcohol abuse
- Threat to self or others

#### Structure

- One hour per week/year

#### Supervision

- Every other week, initiated by Project YES or as needed

#### Intake process for Teen/Mentee

- Parent must call. Short telephone intake provides clinical picture
- In-person parent intake: in-depth background, mentoring preferences
- Match meeting with child, parent, and Project YES staff.

### **Confidentiality**

- Mentor may not divulge any information to: spouse, siblings, other mentors, parents, tutors
- Information not shared with parents of child- if not sure, discuss with supervisor
- Confidentiality doesn't work for child – he may tell so
  1. limit 1 hour
  2. no outlay of funds

This is due to competition (between friends or even siblings) and possible psychological replacement of parents

- Parents have a right to know where you go and when you will return (1 hour)

### **Relationship Building**

Why mentoring works –

- Study of 1990s
- Not buying presents, correcting mistakes, changing teen, healing, fixing, or curing. Just about spending time, listening to what's important to them, exploring their decisions, looking forward to their future. Caring, patience, concern because they CHOSE to.

What can be accomplished in 1 hour?

- “*IM ani kan hakol kan*” – Hillel

How many hours, minutes, and seconds of complete undivided attention does a child get?

Your presence, patience, concern = Builds relationship

- Hard to get child to open up – possibly has been burned:  
Learned adults question them then trap and blame them.

#### **TRUST MUST BE BUILT OVER TIME**

- Mindset = Curiosity and fascination, invite to share life  
Not savior and advisor – Just be there

It takes time. Must trust that it is happening. Stable factor in child's life  
Don't give advice unless asked.

Less effective mentors (vs. effective mentors)

- Do not meet regularly with mentee – inconsistency
- Adopt authoritative tone/stance
- Put more emphasis on changing the mentees behavior than developing a warm relationship based on trust and respect

Story of R' Meir Uri MiStrelisk – Plant a seed

Process over time – you know its happening, but can't see it yet!

#### **Four types of communication:**

1. RITUAL – How are you? Don't answer truthfully 'cuz person really doesn't care.
2. PASTIME – Talk about weather – will not make a difference, insignificant.
3. ACTIVITY – what we are doing now. Learning about teen mentoring. Talking about something we are interested and invested in.
4. INTIMACY – “Moshe I don't think it's working because I'm not comfortable”.  
What a person dreams, is confused by etc. This is ideal but only when teen is ready

#### **You will have a CONVERSATION – vs. Alternating monologue**

- Talk with each other but your own agenda  
i.e. radio show liberals with conservative callers
- Paraphrase, Validate:  
“Tell me more about that”  
“And then what happened”

Father called me lazy, stupid, nothing etc- “I don't know what to say.  
What do you wish I would say?”

#### **Verbal vs. Non verbal communication**

- Facial expression, intonation, rolled eyes and shoulders

#### **Speaking something out brings relief**

- Story of wagon driver- R' Pam

**Speak out intense emotions:** feeling words: Furious, angry, peeved, over whelmed, frustrated

By identifying the quality and intensity of feeling, you can more accurately bring it down. Intense emotions block thinking. Mental rehearsal/speaking out can alter distorted thinking

- Starting or shocking information from child  
i.e. – I listen to z100. Are you surprised? DON'T LIE! Say YES I was and shift back to child – What did you want to tell me about it?
- What about something inaccurate?  
i.e. – too warm or too cold here.  
Reality is 68 degrees – also irrelevant.  
Accept child's perception and help them become comfortable with it.

### **Mental rehearsal/Predict success**

Child needs help with something: I don't know what to do

“What could you possibly do?”

“What choices do you have?”

“What do you think will happen when you...My mother will flip out...?”

“And then what will happen?”

Story of Suri and cigarettes

Don't deny that it will happen. Go along...and then what...

### **SCRIPTS**

“Sounds like that's really hard for you”

“What can you do when that happens?”

“What else can I do?”

“How can I help you with that?”

“What's that like for you?”

“What are you thinking about?”

(Davening is also a script – we have thoughts, feelings, and desires but don't know how to say it.)

## Training Evaluation

Name (optional): \_\_\_\_\_ Date: \_\_\_\_\_

Trainer: \_\_\_\_\_ Location: \_\_\_\_\_

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:

	<i>Poor</i>		<i>Average</i>		<i>Excellent</i>
Effectiveness of trainer	1	2	3	4	5
Training Content	1	2	3	4	5
Training activities	1	2	3	4	5
Training materials	1	2	3	4	5
Training room	1	2	3	4	5
Overall rating	1	2	3	4	5

6. Did the training cover what you expected?

Other comments:

## **Mentee Inquiry Procedure**

All persons inquiring to be program participants (“mentees”) or making referrals regarding potential mentees must speak directly to mentoring program staff. If program staff members are unavailable, other Project YES staff should courteously take a message and inform inquirers that they will be contacted shortly. Program staff must follow the inquiry procedure as outlined below:

1. Program staff is to provide a verbal overview of the program to all phone and in-person inquiries:
  - Overview of the program and program purpose
  - Time (per week) and duration (number of weeks/months) commitments
  - Overview of screening requirements
2. During the initial phone call, the parent/guardian calling on behalf of prospective mentees will be asked to provide demographic information and a brief overview of the presenting problem.
3. Once an initial phone intake has been completed, a one-hour in-person intake is scheduled. Information is tracked in client contacts.

## **Mentee Screening Procedure**

In accordance with the Project YES Mentoring Program screening policy, mentoring program staff should complete the steps below to determine if a candidate qualifies to become a mentee.

### **Mentee Eligibility Requirements**

- Be 10-21 years old
  - Reside in the servicing areas
  - Demonstrate a desire to participate in the program and be willing to abide by all Project YES Mentoring Program policies and procedures
  - Be able to obtain parental/guardian permission and ongoing support for participation in the program
  - Agree to a one-year commitment to the program
  - Commit to spending a minimum of one hour a week with the mentor
  - Be willing to communicate with the mentor weekly
  - Complete screening procedure
  - Mentee must have a genuine need for a mentor, such as (but not limited to) exhibiting poor social skills, behavior/social issues in school, sibling conflict, and/or social isolation
  - Prospective mentees who are diagnosed with severe psychosis, are abusing drugs or alcohol, or are a threat to self/others are considered out of scope of Project YES' services and will be referred to other agencies
1. Upon receiving a call from a parent, program staff must begin the process by creating an electronic file in the client database, including information collected from the phone intake. The information collected will include the youth's name, date of birth, age, name of school presently attending, who the child lives with, name of parents, parents' marital status, demographic information, basic family background and presenting problem.
  2. Mentoring program staff must then make an appointment and conduct an in-person intake with the parents and Project YES clinical staff.
  3. The parents/guardian must fill out the Authorization Form and the Universal Release of Information Form.
  4. Parents will be notified at the conclusion of the in-person intake or within a couple of weeks whether or not their child qualifies for the Teen Mentoring Program.
  5. Based on information gathered through the in-person intake, the program coordinator must make a final determination as to the appropriateness of the participant's involvement in the program.

## **Parent Intake Papers**

## Matching Procedure

1. To begin the match process, the program coordinator reviews the application, intake forms, and interview notes to determine match suitability between a mentor and mentee. The greatest weight will be placed on the mentee's and mentee's parents' preferences and needs. A match selection will be made using these match suitability criteria as a guide:
  - Preferences of the mentor, mentee and/or parent/guardian
  - Same gender
  - Similar religious background
  - Common interests
  - Geographic proximity
  - Compatible personalities
  - Mentor qualifications
  - Availability
2. The program coordinator then first contacts the prospective mentor and without using last names, describes and provides basic information about the mentee to determine if there is interest by the mentor.
3. Given initial interest by the mentor, the program coordinator then provides the mentee's parent/guardian with a basic description and information about the prospective mentor.
4. **Match Meeting:**

Once both parties tentatively agree to the match, a time is scheduled for an introductory meeting. Teen mentoring staff facilitates this introductory meeting of the mentor, mentee, and parent/guardian. The staff member should conduct the meeting by:

  - Facilitating introductions
  - Asking the mentee whether he/she knows the purpose of the meeting.
  - Clearing up any misconceptions.
  - Handing out and reviewing the Match Agreement and Guidelines for Parents. Parent(s) must sign the Guidelines for Parents.
  - After reviewing the above paperwork, the mentor and mentee spend five to ten minutes alone getting to know each other. During this time, the facilitator and parent(s) review appropriate questions that the parent(s) may ask mentor (e.g. whether they have worked with children before, religious affiliation, etc.). Personal information such as the mentor's age and demographic information is considered inappropriate.
  - Facilitating staff member then meets with mentee and mentor individually. Both mentee and mentor have an opportunity to express their feelings about each other to facilitator.
  - If mentee or mentor declines the match following their time together, the individuals remain separated and do not have to meet each other again.

- If anyone is uncertain, the parties may be given time to consider the match further.
- If all agree to move forward with the match, Match Contracts must be completed and signed by all parties. The parent is given an opportunity to interview the mentor. Facilitator is responsible for making sure that only appropriate questions are asked.
- The first mentor and mentee match meeting date and time should be confirmed. Telephone numbers can be exchanged at this time.
- The parent/guardian must provide a copy of the youth's health insurance card or health insurance provider information to the mentor at this time.

The Match Meeting takes about thirty to forty-five minutes.

5. Once the match is made, program staff will add the mentor/mentee name to the Excel spreadsheets titled "Assigned Teen Mentors".

## **Telephone Intake Procedure for Mentee Parent**

Have you ever called Project YES before? (Check the database even if they say no)

(Always get: First and last name, relationship, phone number, full address.)

(Always ask them to spell their last name.)

What prompted you to call Project YES at this time?

How can we help you?

- Get child's name, age, date of birth, school
- Description of issues/concerns
- Child's relationship with siblings
- Child's religious status
- What have you tried so far to address these issues
  - If therapy – how long, with whom
  - If meds – which ones
- How is child doing in school?
  - Academic, social, behavioral
- Has child accepted idea of getting a Teen Mentor?

Insert-Match papers  
Match Agreement  
Parent Guidelines  
Confidentiality Policy  
Match Contract

# Match Support and Supervision Procedure

## Supervision

1. Once matched, the program coordinator or another program staff person will be assigned to support and monitor the match relationships.
2. The assigned staff person will add report logs to the mentee case contact files.
3. After meeting with their mentee, mentors will submit a weekly report form via email or phone.
4. After this initial contact, the assigned staff member will then follow up bimonthly by phone and email with the mentor to gather information regarding meeting dates, times, activities, and how the match is proceeding.
5. Information will be recorded for each contact between assigned staff member and mentor.
6. In order to assess how the match is proceeding, program staff 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 coordinator assesses that there is a potential problem with the match, the coordinator will attempt to clarify the potential problem and work with the mentor, mentee, and/or parent/guardian to resolve the issue quickly.
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 parent/guardian
  - Develop alternative solutions that could address the problem.
  - Evaluate the strengths and weakness 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 lack of contact on the part of the mentor or mentee, the program staff must investigate the reasons for lack of contact with the

offending party, and make efforts to ensure the pair is meeting according to the contracted amount of time per month.

4. If a problem continues, the coordinator should consult with other staff members to devise a viable approach to addressing the problem and proposing potential solutions.
5. If a 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 re-matching with other partners.
6. All support and supervision by program staff must be recorded in the mentee's ongoing case contact file.

### **Other Support**

It is the responsibility of the program coordinator to provide other support to the mentors including but not limited to the following:

- Plan and implement at least one group activity for the mentors per quarter
- Facilitate an ongoing support group for mentors that will meet three times a year.

## Teen Mentor Weekly Report Form

**Fax to 718-758-3130, email to [projectyes@pyes.org](mailto:projectyes@pyes.org) or mail:  
Project YES, 1404 Coney Island Ave., Brooklyn, NY 11230**

Client #: \_\_\_\_\_ Date of Report: \_\_\_/\_\_\_/\_\_\_

Mentor Name: \_\_\_\_\_ Mentor Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Day/Eve

Telephone Contact(s): \_\_\_\_\_

Date: \_\_\_\_\_ Time spent: \_\_\_\_\_ Content of call: \_\_\_\_\_

In person contact:

Date: \_\_\_/\_\_\_/\_\_\_ Time spent: \_\_\_\_\_ hour(s)

Content: (What did you do, where did you go, what did you talk about?) \_\_\_\_\_

Describe the mood of the teen: \_\_\_\_\_

We did not meet this week because (vacation, illness, didn't want to, etc) \_\_\_\_\_

*Please give one brief descriptive sentence to answer each question below. If you need to spend more than ten minutes filling out this form, it may be an indication that a call to the mentoring coordinator for supervision would be helpful.*

1. How do you feel toward your mentee? Identify any positive or negative feelings or opinions you may have.
2. Did the teen do or say anything that seemed to indicate a feeling of closeness or distance, trust or mistrust?
3. What questions or concerns did the teen raise? How did you respond?
4. In what way was this meeting different? What new thing did you learn about your teen?
5. Describe contact with parents of teen, if any.
6. What do you need help with? Do you have any new concerns?
7. Have you noticed any new way(s) that your mentee has demonstrated the ability to cope with difficult situations (at home, in school, resisting peer pressure, managing anger or disappointment, etc.)?
8. Has the mentee demonstrated any new ability to maintain a healthy relationship with you, or discussed relationships with others (parents, family, peers, teachers, etc.)?

## Recognition Procedure

It is the policy of the Project YES Mentoring Program that all mentors be recognized as important to the success of the mentoring program. Particular emphasis will be placed upon recognizing the program mentors.

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

- Host an annual recognition event including selection of a Mentor of the Year along with other acknowledgements of outstanding service and performance.
- 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

The following outlines required recognition activities for the mentors in the Project YES Mentoring Program. This procedure, however, does not exclude daily recognition or other activities that Project YES may undertake throughout the year.

1. Every year the Project YES Mentoring Program will host a participant recognition event such as a picnic, dinner, or other activity. Mentor awards will be presented. A committee including the program coordinator and other teen mentoring staff will determine award criteria and make final determinations based on recommendations from the program coordinator. Other acknowledgments will be made for length of service, recruitment of other mentors, or other outstanding achievements. Recognition will include a certificate and a nominal gift determined by the committee and budget allowances. The program coordinator will lead the planning and implementation efforts with input, assistance and attendance of other staff and the executive director.
2. Outstanding mentors may be asked to assist in presenting at new mentor orientation and training sessions by invitation of the program coordinator.

## Closure Procedure

Project YES staff will follow the closure procedure as closely as possible. The procedure will vary based on whether the match is ending as planned or because of extenuating or difficult circumstances.

1. At the point it is decided that the match is closing, the mentoring program staff will fill out a Match Closure Summary form and 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 longer. A common reason for planning a match closure is that the match is reaching the end of the one-year commitment.

### **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 program 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
  - Discuss Project YES' policy about future contact
  - Distribute participant Closure letters
4. In the absence of a meeting, program staff will attempt to contact all parties by phone to inform them that the match is closing and to determine how best to proceed in closing the match. Closure Letters, Exit Surveys and behavior analysis will be mailed out to the mentor, mentee, and parent/guardian and will include enclosed, self addressed, stamped envelopes.

5. In all circumstances, the mentor, mentee and parent/guardian should all receive a Closure Letter stating that the match has formally ended and that any future contact is beyond the scope and responsibility of Project YES.
6. 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 Letter and all completed Exit Surveys should be placed in the mentee files. A summary of the Closure Procedure will be placed in both the mentor and mentee's electronic case file.
8. If there is no planned future participation in the program, the files of the mentors and/or mentees exiting the program should be placed in program archives.

## Closure Letter

Project YES  
1404 Coney Island Ave  
Brooklyn, NY 11230

*(Name of mentor, mentee, or parent/guardian)*  
*(address)*

Dear *(first name)*,

This letter is to inform you that the mentoring relationship managed by the Project YES 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, Project YES no longer assumes responsibility for monitoring and supervising the match and your file will be closed. Any future contact between match partners is at the sole discretion of all parties involved (mentor, mentee, and parent/guardian). Any incidents occurring due to future contact among match participants would be beyond the scope and responsibility of Project YES.

Thank you for your involvement in our program. We appreciated your participation.

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

Sincerely,

Esther Gross, MS, CRC  
Director of Mentoring  
Project YES

## Match Closure Summary

Name of Mentee: \_\_\_\_\_

Name of Mentor: \_\_\_\_\_

Match Date: \_\_\_\_\_ Closure Date: \_\_\_\_\_ Length of Match: \_\_\_\_\_

Please circle the circumstances and check the reason for match closure:

<b>Planned</b>	<b>Mentor</b>	<b>Mentee</b>
Completed one-year match		
Other, specify		

<b>Extenuating</b>	<b>Mentor</b>	<b>Mentee</b>
Relocation		
Life Change		
Time/Schedule Conflict		
Family/Personal/Health Issues		
Other, specify:		

<b>Difficult</b>	<b>Mentor</b>	<b>Mentee</b>
Violation of Policy		
Behavioral Problems		
Lack of Cooperation with Project YES		
Parent/Guardian Withdrew Youth		
Lost Interest		
Other, specify:		

Additional details concerning the closure:

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

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

## Mentee Exit Survey

Thank you for being a mentee in the Project YES 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:

What aspects of the Project YES Mentoring Program did you like the best?

What aspects of the Project YES 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 re-matched? Yes No

Please provide any additional comments:

## Mentor Exit Survey

Thank you for serving as mentor in the Project YES 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: \_\_\_\_\_

Mentee Client Number: \_\_\_\_\_ 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:

Do you feel you received adequate support and supervision from your program staff?

What aspects of the Project YES Mentoring Program did you like the best?

What aspects of the Project YES 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 re-matched? Yes No

Please provide any additional comments:

### Parent/Guardian Exit Survey

Thank you for letting your child participate in the Project YES Mentoring Program. We hope your child 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 Child: \_\_\_\_\_

Name of Mentor: \_\_\_\_\_

Length of Match: \_\_\_years \_\_\_months

Check what best describes your relationship with your mentee. 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/her life? Yes No  
Please explain below:

Do you feel you received adequate support and supervision from your program staff?

What aspects of the Project YES Mentoring Program did you like the best?

What aspects of the Project YES 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 re-matched?    Yes    No

Please provide any additional comments: