



**Deep Run Emerging Leaders
2016-2017**

Expectations and Guidelines

The Deep Run Emerging Leaders Program's mission is to foster the development of a supportive and guiding relationship between a responsible peer and a freshman student in order to help students polish their overall academic performance, learn effective organizational and prioritization skills, shape attitude and perception of school, and become a productive student, citizen, and leader. We believe that every student possesses the ability to be a leader; sometimes they just need guidance and modeling in order to hone these skills for themselves!

Program Expectations

- Students will be matched with an upperclassman peer mentor from Deep Run's Foundations of Leadership class
- Students will meet with their peer mentor twice a month during lunch; these meetings will be logged by the peer mentor
- At least one of these monthly meetings can take place in a group setting with fellow Emerging Leaders and peer mentors
- The Emerging Leaders group will visit at least two local colleges or universities
- Students and mentors will participate in at least two community service projects at Deep Run

In order to participate in the Emerging Leaders Program, you must agree to the following guidelines:

- Follow all rules and guidelines as outlined by the program coordinator; mentee training; program policies; and this contract
- Have a positive attitude and be respectful of your peer mentor and other students.
- Make a commitment to be matched to your peer mentor through the 2016-2017 school year
- Attend all scheduled lunch meetings with your mentor
- Be on time for scheduled meetings or call the school mentor coordinator (Ms. McGuire or Ms. Bien at 364-8020) at least 24 hours beforehand if you are unable to make a meeting
- Openly communicate with the program coordinators as requested
- Inform the program coordinators of any difficulties or areas of concern that may arise in the relationship
- Participate in a closure process and end of year event when the time comes
- Notify the program coordinators if you have any changes of address or phone number

_____ **(please initial)** I understand that upon the end of the 2016-2017 school year, future contact with my peer mentor is beyond the scope of the Deep Run Mentoring Program and can happen only by the mutual consensus of the mentor, the mentee, and my parent/guardian.

I agree to follow all of 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.

Student Signature

Date

Signature of Parent or Legal Guardian

Date



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Parent Permission

Dear _____,

This year your child will have the opportunity to work with an upperclassman peer mentor from Deep Run's Foundations of Leadership Class (and supported by the Henrico Heroes Mentor Program) to learn the ins and outs of becoming a successful student at Deep Run High School.

To participate in the mentoring program, a student must agree that:

- He or she will keep all meetings with his/her mentor (most meetings will take place during lunch).
- He or she will notify the mentor and/or the Henrico Heroes Mentor Program Site coordinators (Ms. McGuire or Ms. Bien) if unable, because of illness or other serious obligation, to keep a meeting.

Parents are asked to support the mentoring program by agreeing to:

- Communicate with the Henrico Heroes Mentor Program Site Coordinator (Ms. McGuire or Ms. Bien) about any concerns you may have regarding the program or your child's relationship with the peer mentor.

Failure to abide by the mentor program participation expectations and guidelines and the Student Code of Conduct, and failure to make a commitment to the program will be just cause for a student's dismissal from the Henrico Heroes Mentor Program.

If you have any questions or concerns about the program, please contact Ms. McGuire, School Counselor or Ms. Lindsay Bien, School Counselor at 804-364-8020.

I give permission for my child to participate in the Emerging Leaders/Henrico Heroes Program at Deep Run High School. I have reviewed the attached participation expectations and guidelines with my child.

Signature of Parent or Legal Guardian

Date

Your child indicates his or her agreement to participate and to abide by the attached participation expectations and guidelines by signing below.

Student Signature

Date



**Deep Run Emerging Leaders
2016-2017**

**Application
(To Be Completed by the Parent/Guardian)**

The purpose of this application is to help us get to know your child better in order to make the best peer mentor match for them. It also provides information for contacting parents or guardians in the case of an emergency. ***The information on this page and the next is for the program coordinators only and will not be shared with the peer mentors.***

Personal Information:

Student Name: _____ Date: _____

Parent/Guardian Name: _____

Relationship to the Student: Mother _____ Father _____ Other, specify _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Date of Birth ____/____/____ Age: _____ Gender: Male _____ Female _____

Ethnicity: _____

Emergency Contact Name: _____ Phone Number _____

Please list all the members of your household:

Name	Sex	Age	Relationship to Applicant

Background Information

Please answer the following questions as completely as possible. This information will not be shared with your student's peer mentor; rather, it is to help us, the mentor coordinators, guide students in case any problems arise. If more space is needed, you may use extra paper or write on the back of the pages.

Why do you and/or does your child want to participate in the Emerging Leaders program?

What do you want your child to get out of this program?

Has your child encountered or is your child currently encountering any difficult situations either at home or school that you feel we should know about?

Please list your child's interests and hobbies.

Medical History:

Does your son/daughter have any physical problems or limitations?

Is your son/daughter currently receiving treatment for any medical issues?

Is he/she currently on any type of medication? If so, please specify.

Does your son/daughter have any known allergies?

Does your son/daughter have any emotional issues or problems right now?

Is your son/daughter currently seeing a counselor or therapist?

Please read this carefully before signing

We greatly appreciate you and your child’s interest in participating in the Emerging Leaders Program. This application, as well as the supporting documents, are intended as a means of informing and gaining the consent of the parent/guardian to allow their son/daughter to participate in this opportunity.

After receiving this completed application from you, we will evaluate the information, and match your son or daughter with a peer mentor for the program. We will use much of the information that you supplied in this application to match your child with an appropriate mentor.

Please initial each of the following statements:

____ I give my informed consent and permission for my child to participate in Deep Run’s Emerging Leaders program and its related activities (field trips will have additional permission slips to sign)

____ I agree to have my child follow all Emerging Leaders guidelines and understand that any violation on my child’s part may result in suspension and/or termination of the mentoring relationship.

____ (optional) I agree to allow Deep Run’s Emerging Leaders Program 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.

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.

- Expectations and Guidelines (Page 1)
- Parent Permission (Page 2)
- Mentee Application (Pages 3-4)

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

Signature of Parent or Legal Guardian

Date

**PLEASE RETURN THIS APPLICATION AND THE ITEMS LISTED ABOVE
TO MS. MCGUIRE OR MS. BIEN, THE SCHOOL’S MENTOR
COORDINATORS AND SCHOOL COUNSELORS**