| Date Received: |  |
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by:

## STARTING POINT MENTORSHIP PROGRAM (SPMP) MENTEE Application

The goal of this program is to offer <u>current California Community College students</u> an opportunity to connect with UC Berkeley student mentors who can provide appropriate information, access to resources, and share their campus experience. Please complete the following information thoroughly and clearly. Signing this document also grants your mentor permission to review the following pages.

The Transfer, Re-entry and Student Parent Center (TRSP) serves a diverse population of students. While primarily a academic support unit on the Berkeley campus, TRSP is also committed to providing access and information to those interested in exploring the possibility of studies at Cal. For more information visit TRSP at:

100 César E. Chávez Student Center and/or http://trsp.berkeley.edu/prospective.htm

| Last Name:   |                 | First:                         |  | Middle:                                 |  |  |
|--|-----------------|--------------------------------|--|---|--|--|
| Address:   |                 |                                | City:  | Zip:                                    |  |  |
| Telephone: (   | ) -             | Email:                         |  |   |  |  |
| : Social Security Number <u>Last 4 digits only (Optional)</u>  |                 |                                |  |   |  |  |
| This information is only used to <i>verify</i> that students have participated in Starting Point (SPMP) when applying to UC Berkeley, it will be not used for any other purpose. SPMP is one criterion used when considering applicants for UC Berkeley admission. |                 |                                |  |   |  |  |
| will be not use  |                 | USE. SPWIP IS ONE CITERION USE |  | Indicate Your Expected Transfer Year:   |  |  |
| Community C  |                 | Intended Major:                | Fall 2013  | 3 Fall 2014 Fall 2015 Fall 2016         |  |  |
| Employed? Yes No   |                 |                                |  |   |  |  |
| (in addition   | to academic cou | 4) Ethnicity:                  |  |   |  |  |
| For statistical purposes only:   |                 |                                |  |   |  |  |
| MM / DD / YYYY   |                 |                                | African-American/Black American Indian Caucasian |   |  |  |
| 1) Date of Birt  | h: / /          | Asian/Asian-Ame                | rican Hispanic/Chica                             |   |  |  |
| 2) Age:  | 3) Gender: M    |                                |  | ors of Arts/Science Degree from a four- |  |  |
| Please indicate with a check mark all that apply:  |                 |                                |  |   |  |  |
| Transitioning (18-24 yrs.) Re-entry (25 yrs. and above) Veteran Foster / Independent Care  |                 |                                |  |   |  |  |
| FOR STUDENT PARENTS ONLY:  |                 |                                |  |   |  |  |
| Married Student Parent Single Student Parent Children's ages:  |                 |                                |  |   |  |  |
| Please indicate with a check mark if you are or have been a part of any of the following programs:   UCB's Transfer Alliance Project (TAP) PUENTE MESA EOPS TRIO Other :   |                 |                                |  |   |  |  |
| Would this be your first time participating in the Starting Point Mentorship Program? Yes 🗌 No 🗌   |                 |                                |  |   |  |  |
| Preferred method of contact with UC Berkeley mentor [choose two (2)] At least one must be phone or e-mail:<br>No Preference Telephone Email Online Chat At UC Berkeley Campus At Your Community College  |                 |                                |  |   |  |  |
|  |                 |                                |  |   |  |  |
| For office use only:<br>Semester: Fall Spring Mentor:  |                 |                                |  |   |  |  |
| 1 <sup>st</sup> attempt: /   | /               | 2nd attempt: / /               | 3rd attempt: / /                                 | Circle one:                             |  |  |
| Telephone Er   | mail            | Telephone Email                | Telephone Email                                  | Active / Inactive                       |  |  |



## Mentee Agreement

Please Note both parties (<u>mentee and mentor</u>) are required to follow the program guidelines to ensure the integrity and success of the Starting Point Mentorship Program (SPMP).

- 1. I agree the information I provided on this application is current and completed and I will notify Eva Rivas by e-mail at <u>erivas@berkeley.edu</u> or by phone (510) 643-5740 if it should change.
- 2. I agree to provide my mentor with a way to contact me by phone and/or e-mail.
- 3. I agree that any information shared by the mentor is considered confidential unless stated otherwise.
- 4. I agree not to share the mentor's private contact information without permission.
- 5. I agree there will be no physical contact of a romantic nature with the mentor while participating in the Starting Point Mentorship Program.
- 6. I agree that the mentor, TRSP staff, or I may terminate the mentee/mentor relationship at any time and will notify Eva Rivas.
- 7. I agree that my information may be shared with representatives at TRSP.
- 8. I understand that at any time during my participation in the program I can contact Eva Rivas with any questions, concerns, and/or problems.
- 9. I understand that in order to participate in Starting Point I am expected to:
  - Remain engaged and connected throughout the program with my mentor: in person, via telephone, and/or via e-mail
  - Respond to my mentor's e-mails and/or phone messages
  - Notify my mentor in advance if I am unable to attend or will be late to a pre-arranged meeting
- 10. I understand the I can expect the following from my mentor:
  - Advice on study strategies such as time management, setting realistic goals, utilizing resources and services, and taking advantage of enrichment opportunities
  - Information on mentor's academic and social experiences at UC Berkeley
  - Discussions on the differences between community college and Cal
  - Encouragement to explore academic potential and achieve goals
  - Support and motivation to continue in higher education
  - Perspective of the academic rigors at UC Berkeley
- 11. I understand that SPMP mentors *ARE NOT* academic advisors and as such will not advise me on course requirements or my personal statement. I will seek academic advise from a community college counselor, UCB's Office of Undergraduate Admissions or UCB's Community College Transfer Center.
- 12. I understand that all mentors participating in the Starting Point Mentorship Program will be required to sign a similar agreement.

Name:

Today's Date: / /

Signature:

If submitting application electronically, please check box.

PLEASE KEEP A PHOTOCOPY FOR YOUR RECORDS! DEADLINE to submit for Spring 2013 is <u>March 8, 2013</u>

| Please complete forms and email or send to: | Eva Rivas (erivas@berkeley.edu)                  |  |  |
|---|--|--|--|
| ·   | Executive Director, (510) 643-5740               |  |  |
|   | Transfer Re-entry & Student Parent (TRSP) Center |  |  |
|   | 107 César E. Chávez Student Center               |  |  |
|   | University of California                         |  |  |
|   | Berkeley, CA 94720-4260                          |  |  |
|   | http://trsp.berkelev.edu                         |  |  |