

**Peer Mentor
Application Form**

Name of Applicant _____

Address _____

Telephone # _____

Email Address _____

Social Worker _____

Social Workers Telephone Number _____

1. How many years have you been fostering? What level of care have you provided?

2. How many children have you cared for? Were they mainly short term (less than 6 months) or long term placements?

3. What year did you complete your PRIDE Pre-Service training? _____

4. Please list any training completed in the past five years.

5. What is your level of involvement with the Local Association in your region? (if applicable)

6. What is your level of involvement/connection with the Newfoundland and Labrador Foster Families Association?

7. What has been the biggest challenge you have experienced as a foster parent? Please briefly describe this experience.

8. Have you had any previous experience as a mentor or a similar role? Please describe your experience.

9. Please state why you want to be a Peer mentor?

10. Using the role description attached, please outline what skills and qualities you think you will bring to this role?

11. Is there any other information you would like to provide for our consideration of your application?

Signature: _____

Name: _____ **(Please print)**

Date: _____

Applicants who are selected to be peer mentors will have to participate in training.

Please indicate below your preferred days for training.

_____ Monday to Friday

_____ Weekend

_____ Any days are okay

Please forward completed application form and the reference from your social worker to:

Amy Kendall
Newfoundland and Labrador Foster Families Association
Suite 105
21 Pippy Place
St. John's,
NL A1B 3X2

Applications may also be emailed to amykendall@nfld.net