

Veterans Court Mentor Application

Last Name: _____ First Name: _____ Middle: _____

Address: _____

DOB: _____ Gender: _____ SSN: _____

Best Phone Number: _____ E-mail: _____

Service Branch: _____ Service Dates: _____

Rank: _____ Combat/Support of Combat Operation: Yes ____ No ____

Disabled: Yes ____ No ____ Type of Discharge: _____

Area of Operation: _____

Number of Deployments: _____ Area of Deployment(s): _____

Last Duty Station: _____

Previous Units Assigned: _____

Job(s)/Positon(s)/Career Field: _____

Achievements/Commendations: _____

Current Employer: _____ Position: _____

Do you speak a language other than English? Yes ____ No ____

If yes, list languages: _____

Have you previously served as a mentor? Yes ____ No ____

If yes, in what capacity and where? _____

Have you had any criminal charges within the last five (5) years? Yes ____ No ____

Do you have any pending criminal charges? Yes ____ No ____

Are you willing to submit to a background investigation? Yes ____ No ____

Signature

Date