



## THE WHAT:

The Trinity Mentoring program of West-Central Wisconsin empowers the local youth through positive inspiration and guidance by a Trinity Mentor while creating a challenge for reaching a goal designed specifically for them resulting in a lasting, positive impact in their life.

## THE HOW:

How is the above mission statement achieved? It is surprisingly simple; Get them out of the house, get them active, have a ton of fun, and work on a personalized goal!

## THE BIG PICTURE:

Trinity Mentoring envisions a community in which every youth discovers their "untapped" potential through a positive, nurturing one-on-one relationships which in turn allows each youth to develop and learn to lead a happy, inspired and productive life.

## MENTOR ELIGIBILITY REQUIREMENTS:

- Be able to adhere to Trinity Mentoring's policies and procedures
- Have reliable transportation and a satisfactory driving record
- Have a current and valid driver's license as well as current/adequate auto insurance
- Be willing and able to spend a minimum of 10 hours per week with your client(s)
- Have never been accused, arrested, charged or convicted of child abuse/neglect or molestation
- Have never been accused, arrested, charged or convicted of any sexual misconduct
- Not a convicted felon
- Not a user of illicit or illegal drugs (marijuana included)
- Not a user of alcohol or controlled substances in an excessive or inappropriate manner
- Not currently in treatment for substance abuse. If substance abuse problem has occurred in the past, the applicant must have completed a non-addictive period of at least five years
- Not currently in treatment for a mental health disorder or have been hospitalized for a mental health disorder in the past five years
- And most importantly, have a passion for kids and a zest for life!

## WORKSHOP MENTOR'S ROLE

- Seasonal commitment (does not require a one-year commitment)
- Short term matches with clients
- Set schedule with flexible sign up
- Group work as well as one-on-one work
- Opportunity to lead Workshop groups or participate with clients
- Training and personal ongoing support
- Activities on-site and field trips out in the community

## TRINITY MENTOR'S ROLE:

- 1-year commitment
- One-on-one with client
- Create own schedule and activities
- Choose own caseload for long-term commitment
- Build the relationship by working together on their goals through planning and participating in activities together
- Help set, update, and work toward accomplishing goals
- Training and personal ongoing support
- Activities on-site and in the community

## DESIRABLE QUALITIES OF A TRINITY MENTOR:

- Creative
- Independent
- Willing and active listener
- Encouraging, supportive and assertive
- Lifelong learner
- Patient and flexible
- Tolerant and respectful of individual differences
- Strong, clear and confident communicator

## BENEFITS OF WORKING AS A TRINITY MENTOR:

- Personal fulfillment through contribution to the community and clients' lives
- Satisfaction in helping a youth mature, progress and achieve goals
- Flexible, independent, and fun job
- Training session and opportunity for group activities
- Mileage and expenses are reimbursed
- Personal ongoing support and supervision to help match with client succeed
- Complimentary tickets to community events
- Trinity Equestrian Center is an excellent, competitive, family owned and operated farm to put your desire to challenge and change the local youth into action. We strive to put together a positive, well-constructed, passionate team of people who want to change the trajectory of our local youth. We listen. We adapt. We act.

## TRINITY MENTORING HIRING PROCESS:

- Written application
- Interview
- Criminal history check: state, child abuse and neglect registry, sexual offender registry and driving record check
- Orientation training
- Shadowing with a current Trinity Mentor (please note, applicant is officially hired after a positive report of the shadowing experience by a seasoned Trinity Mentor)
- Matching Meeting to obtain clients



# Trinity Mentoring Compensation Agreement:

**Initial Training** - \$150 includes Shadowing, Orientation, Matching and documentation training.

**Mentoring** - Hourly rates include stipends for all mileage driven, activity/food expenses, and for the time to document appointments.

- High School - \$20 per hour
- Bachelor's - \$25 per hour
- Master's - \$40 per hour

**Workshops** - Hourly rates include stipends for all mileage driven and for the time to document appointments.

- High School - \$15 per hour
- Bachelor's - \$20 per hour
- Master's - \$35 per hour

### Workshop Leaders

- After school - \$100 per day
- Summer - \$125 per day

**Long distance driving bonus**- If a Mentor drives over 130 miles per appointment, they will receive a \$10 bonus for that appointment.

**Continuing Education** (Training, Pods, Supervision etc.) - \$18 per hour regardless of degree level.

**Outlier Pay Rate** - For Office Use Only \_\_\_\_\_

I, \_\_\_\_\_, on the day of \_\_\_\_\_, acknowledge and accept the Trinity Mentoring Compensation agreement as listed. All changes to the Trinity Mentoring compensation agreement require sign off by the Director of Trinity Mentoring.

\_\_\_\_\_  
Current Degree Level/Pay Rate

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Director Signature



Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Social Security Number \_\_\_\_\_

Email \_\_\_\_\_ Driver's License # \_\_\_\_\_

Major/Degree/University \_\_\_\_\_ Grad Date \_\_\_\_\_

What position(s) are you applying for: **Youth Mentor** or **Workshop Mentor**?

How did you learn about Trinity Mentoring? \_\_\_\_\_

Can you walk for 60 minutes or more and jog for short distances? \_\_\_\_\_

Do you have any medical conditions? If so, please describe: \_\_\_\_\_

Do you have any experience working with individuals with special needs? \_\_\_\_\_

Have you ever been accused of, or convicted of a drug, alcohol or child related offense? \_\_\_\_\_

Have you ever been convicted of any Crime? \_\_\_\_\_

### Employment History:

Please list your current employer and/or previous employment. Begin with the most current position, and list all previous in chronological order.

1. Employer Name \_\_\_\_\_ Date of Employment \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Products/Services \_\_\_\_\_

Salary (Begin & Ending) \_\_\_\_\_ Position Held \_\_\_\_\_

Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

2. Employer Name \_\_\_\_\_ Date of Employment \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Products/Services \_\_\_\_\_

Salary (Begin & Ending) \_\_\_\_\_ Position Held \_\_\_\_\_

Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

3. Employer Name \_\_\_\_\_ Date of Employment \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Products/Services \_\_\_\_\_

Salary (Begin & Ending) \_\_\_\_\_ Position Held \_\_\_\_\_

Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

### References

Professional Reference: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Company: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Professional Reference: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Company: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

### Additional Info:

Why do you want to be a Trinity Mentors? Please include any additional info you think would be helpful to us in considering you for employment.

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## Medical Contact Information

In case of Emergency, please contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell/Other \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Physician \_\_\_\_\_ Phone \_\_\_\_\_

Primary Hospital/HMO and City \_\_\_\_\_

I give my consent to Trinity Equestrian Center to secure medical transportation and treatment, including x-ray, surgery, hospitalization and medication

I do not give my consent for emergency medical treatment/aid in the case of illness or injury while being on the property of the agency. In the event emergency treatment/aid is required, I wish the following procedures to take place \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Liability Release (MANDATORY)

In accordance with the Wisconsin Law relating to the limitation of civil liability regarding equine activities: "NOTICE: A person who is engaged for compensation in the rental of equines or equine equipment or tack or in the instruction of a person in the riding or driving of an equine or in the being a passenger upon an equine is not liable for the injury or death of a person involved in the equine activities resulting from the inherent risks of equine activities, as defined in section 895.481(1)(e) of the Wisconsin Statutes." As a mentor at Trinity Equestrian Center, I acknowledge the risks and potential for risks of a horseback riding program. However, I feel that the possible benefits to myself and the client I work with are more important than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for damages against Trinity Equestrian Center, its board of directors, instructors, therapists, mentors, volunteers, and/or employees for any and all injuries and/or losses I may sustain while participating in Trinity Equestrian Center programs.

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



## Photo Release (MANDATORY)

I consent to and authorize the use and reproduction by Trinity Equestrian Center of any and all photographs and any other audio-visual materials taken of me for promotional material, educational activities, exhibitions or for any other use for the benefit of the program.

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

## Affirmation

I affirm to the best of my knowledge all information on this application is true and correct. I understand any false statements, representations or failure to disclose pertinent information is sufficient cause for removal from hiring consideration and/or dismissal from employment.

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

Once completed, please email application and resume to [Hiring@trinity-ec.com](mailto:Hiring@trinity-ec.com)