Central Vermont Big Picture Academy of Rochester High School

Mentor Profile

CVBPA Intern: _____ BP Advisor: _____

Mentor's Name: _____ (other names:_____)

Date of Birth: _____ Title/Role of Mentor: _____

Internship Site/Workplace: _____

Workplace Address: _____
Street City State Zip

Mentor Contact Info:

Work Phone	
Home Phone	
Cell Phone	
Email	
Fax	

Planned Start-Up Date of Internship: _____

For our student's safety and well being, all mentors and other employees that students may come in contact with while at their LTI site will be screened based on the WNWSU volunteer policy (attached). The policy states that all volunteers will be screened based on the Vermont Internet Sex Abuse Registry.

Other employees that students may come in contact with while at the LTI site:

Name of Employee	Date of Birth