

**Partnership for Family Health:  
Northern Manhattan HIV Consortium  
722 West 168<sup>th</sup> Street, 11<sup>th</sup> Floor  
New York, NY 10032**

**Phone: 212-305-1923 Fax: 212-305-0506 E-mail: ms2259@columbia.edu**

**The Afterschool Program**

Success in school helps kids with HIV/AIDS feel normal.  
Success in school gives positive families more hope for the future.

The Afterschool Program of the Partnership for Family Health provides academic tutoring, mentoring, art exposure, music appreciation and instruction for all ages, and lifeskills / job readiness seminars and college preparation for older youth.

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Academic tutoring is geared to the individual student. Most students need help with junior-high level mathematics, reading comprehension, writing, vocabulary enrichment and test-taking skills.

Flexible afterschool tutoring sessions are arranged at the clinics (**St. Luke's Roosevelt Hospital** Center for Comprehensive Care and **Metropolitan Hospital's** Special Family Assistance Program) or at public libraries near students' homes in northern Manhattan and the Bronx.

Because of the nature of the tutor-to-student relationship, we ask that each volunteer be able to commit to at least:

2 hours of volunteer service each week for  
no less than one full semester (12 weeks).

Volunteer candidates who can commit to one full year (12 months) of service will be preferred over those who can only commit to a shorter period.

**Volunteer Requirements  
for  
Tutoring and Mentoring Children and Youth**

1. Commitment to at least 2 hours of volunteer effort per week for at least one full semester (one full year is preferable).
2. Submission of the following application.
3. Initial interview with the coordinator.
4. Orientation and training workshop – approximately two hours.
5. Negative test for TB within the previous 12 months.
6. Immunizations as required by the School Immunization Law (NYS).

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**The Afterschool Program  
Volunteer Tutoring and Mentoring Application 2005-06**

The following information is requested in order to determine participation in the Afterschool Program and to help make appropriate matches between volunteer tutors/mentors and students. Please respond to all questions and describe your qualifications in detail.

Name \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary Telephone \_\_\_\_\_ Alt. Tel. \_\_\_\_\_

Email Address \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City/State/ Zip \_\_\_\_\_

What is the highest academic level you have completed thus far? \_\_\_\_\_

Area of Study or Current Employment \_\_\_\_\_

School or Employer's Name \_\_\_\_\_

School/Work Address \_\_\_\_\_

Work Telephone and Fax \_\_\_\_\_

What grade levels and subjects do you feel competent to tutor? (Check all.)

Kindergarten – 3<sup>rd</sup> Grade \_\_\_\_\_ 4<sup>th</sup> – 8<sup>th</sup> Grades \_\_\_\_\_ 9<sup>th</sup> – 12<sup>th</sup> Grades \_\_\_\_\_

Mathematics \_\_\_\_\_ Reading \_\_\_\_\_ ESL \_\_\_\_\_ Test Prep \_\_\_\_\_ Writing \_\_\_\_\_

Other \_\_\_\_\_ (explain) \_\_\_\_\_

If you play a musical instrument, would you be interested in giving lessons? Below please note the instrument(s) on which you feel competent to instruct a beginner:

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How long can you commit to this volunteer service? One year \_\_\_\_\_ Less than one year \_\_\_\_\_

What do you believe you have to offer the children, youth and families participating in our Afterschool Program? (Be sure to include special interests, hobbies or skills that you feel you can share with students.)

List clubs, associations, organizations or civic groups that you have belonged to:

Have you ever been convicted of a crime other than a parking violation? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what was the offense? Please provide a description and the date of each incident.

School, Employment and Volunteer History (past 5 years)

Sch./ Employer's Name, Address and Telephone	Your Title and Responsibilities	Years of Employment and Reason for Changing


**References**

Please list two people (other than relatives) who have known you for at least three years and who can serve as character references:

Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Day Telephone \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City/State/ Zip \_\_\_\_\_

Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Day Telephone \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City/State/ Zip \_\_\_\_\_

Thank you for your interest in our program. You will be notified by telephone or email regarding the interview which is required for volunteers in the Afterschool Program.