



**AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.  
PRE K MENTORING PROJECT  
INITIAL INTEREST FORM**

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

**Contact Information:**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Cell: \_\_\_\_\_

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

Street Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

City: \_\_\_\_\_ State: FL Zip: \_\_\_\_\_

How did you hear about the Program? \_\_\_\_\_  
\_\_\_\_\_

Why are you interested in volunteering as a Pre K Mentor? \_\_\_\_\_  
\_\_\_\_\_

Do you have access to transportation?       Yes       No      Type: \_\_\_\_\_

**A PRE K MENTOR IS REQUIRED TO:**

- Must be 55 years of age
- Enjoy working with children
- Volunteer 20 hours per week during the school year
- Mentor at least 4 children
- Complete required training
- Commit to serving 1 year in the program

Application Mailed (Date) \_\_\_\_\_

Initials \_\_\_\_\_

**Mail Form to: Area Agency on Aging PB/TC, Attn. Mildred Gilbert  
4400 N Congress Ave., West Palm Beach, Florida 33407**