

MENTOR APPLICATION

Return to:
Alabama Wildlife and Freshwater Fisheries
Attn: Mentored Hunt Coordinator
8211 McFarland Blvd
Northport, AL 35476
Or Email to:
Justin.Grider@dcnr.alabama.gov

OFFICIAL USE ONLY	
Application Received	_____
References Sent	_____
Reference 1 Received	_____
Reference 2 Received	_____
Criminal History Received	_____
Instructor # Assigned	_____

Please Type or Print

Name _____ Date of Birth _____ Sex (M Or F) _____

Home Address _____ Home Phone (_____) _____

City _____ County _____ Zip Code _____

Email Address: _____ SSN: _____

Where Do You Work/Study: _____ Occupation _____

Business Address _____ Business Phone (____) _____

Ethnicity _____ Education-(Circle One) High School 10 11 12 College 1 2 3 4 Grad. 1 2 3 4

Previous volunteer experience _____

What type of hunting would you feel most comfortable teaching at the present time?
(i.e., Deer Hunting, Squirrel Hunting, Turkey Hunting, etc.)

Special training, skills or interest _____

Hunting or shooting experience _____

What restrictions might affect your availability for volunteer work?

Times available for work _____ Times not available _____

Counties in which you're willing to volunteer. Please list all that apply _____

Have you ever been arrested for anything other than a traffic violation? _____

(If yes, please explain) _____

Have you ever been ticketed for violating game & fish laws? _____

(If yes, please explain) _____

Have you successfully completed a hunter education course? _____ If yes, in what state was course taken? _____ What is your certification number? _____ When was course taken? _____

A minimum of two references (not related to you) are required to provide accurate information about your character and ability to enthusiastically promote safe responsible hunting. Please provide the following information:

Name _____ Email _____

Address _____ City _____ Zip _____

Contact phone (_____) _____ Occupation _____

Name _____ Email _____

Address _____ City _____ Zip _____

Contact phone (_____) _____ Occupation _____

Please list one alternate person for use as a reference

Name _____ Email _____

Address _____ City _____ Zip _____

Contact phone (_____) _____ Occupation _____

An investigation or electronic criminal history check of your background is required prior to appointment as a Mentor. Do you object to such an investigation? _____ (If yes, you will not be eligible to become a certified Mentor.)

I fully understand that I will be investigated prior to my appointment as a Mentor. If appointed, I will contribute the necessary time to meet the training requirements in Alabama. I accept my responsibility as a mentor to pass along to those entrusted to me as much knowledge and skill as possible. I certify that all information on this application is true and factual.

Signature _____ Date _____