

**DAUPHIN COUNTY VETERANS' COURT  
VOLUNTEER MENTOR APPLICATION**

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

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

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

Branch of Service \_\_\_\_\_ Length of Service \_\_\_\_\_

Military Rank(s) \_\_\_\_\_

Military Occupation(s) \_\_\_\_\_

Discharge listed on DD 214: \_\_\_\_\_ Do you have a copy of your DD 214?  Yes  No

Occupation: \_\_\_\_\_ If retired, please list previous occupation \_\_\_\_\_

Are you an Accredited Services Officer?  Yes  No

What motivated you to want to participate in Veterans Court Mentoring Program?

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What does being a Mentor mean to you?

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What skills and experience do you bring to the mentoring program that will be helpful to you, the other mentors, or the veterans in the program?

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**\*Mentors must submit to a vetting process (background check) and have an Honorable Discharge. Please provide a copy of your DD-214 at the initial orientation.**

**\*\*Applications may be submitted to: Attn: Catharine Kilgore, Dauphin County Courthouse, 101 Market Street Office of the District Attorney, Room 205, Harrisburg, PA 17101.**

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Phone: (717) 780 – 6767