



What a child needs to be exceptional.

# The Pathways Mentor Program



Dear Parents,

Thank you for encouraging your child to help support our community by becoming involved in Pathways for Exceptional Children's **Mentor Program**.

Pathways provides a variety of programs and activities offering children in Montville Township opportunities to perform community service and gain the invaluable experience of mentoring another child. We do our best to match up children having special needs with appropriate trained mentors based on many factors including schedules, interests, and requests by mentors and parents of children with special needs.

Mentors receive our monthly newsletter listing current programs and activities. To participate, they need to email **mentor4pathways@yahoo.com** or call **973-331-3366** and indicate which program(s) they want to sign up for, and we will follow up with an email confirmation. All this information is in the

Mentor News and on our website at **www.montvillepec.org**.

We want to be sure that you, the parent of a mentor, understand the mechanics of the programs your child participates in. Attached to this letter is a description of our programs along with a permission slip. Please review the information with your child, complete the form, including your signature, and send it to **55 Madison Ave, Suite 400, Morristown, NJ 07960** so your child can continue mentoring this year. A new signed permission slip is required every year in order for your child to mentor at our programs.

If you have any questions or concerns, please contact us. Pathways is dedicated to making our programs enjoyable experiences that benefit everyone involved. We welcome your comments and suggestions and look forward to seeing you soon!

***Please Note:** Pathways for Exceptional Children works in conjunction with the Montville Recreation Department to help develop the special needs recreation and mentoring programs. As with all other programs provided by the Montville Recreation Department, the special needs recreation and mentoring program DOES NOT provide accident insurance.*



# Pathways for Exceptional Children Mentor Program

**Recreation Programs** run for approximately 4-6 weeks, requiring a commitment of once or twice a week during that time period. The number of mentors is determined as needed. Throughout the program, a mentor may be assigned to many different children or one specific child. These programs are a good choice for mentors who want to be involved in a particular sport or activity. Prior knowledge or experience is not necessary. We may occasionally schedule a field trip. If bus transportation outside of Montville is required, parents will be asked to sign individual permission slips for the event. Adult supervision is always provided at the programs, either by individuals employed and/or contracted by Montville Township Recreation Department to run the programs or by private entities where programs take place.

**Home-Based Buddies Program** gives mentors an opportunity to work with one child over a period of time, providing flexibility for a mentor with a busy schedule. The special needs parent is required to sign a written agreement that they understand the Home-Based Buddies Program is NOT for babysitting purposes. The mentor spends time at the child's home on a volunteer basis. This agreement also requires the special needs parent to remain on premises to train the mentor involved with their child and supervise

all activities for an enjoyable and successful experience for both children. If at any time the parent of the special needs child fails to follow this agreement, they will forfeit use of the program. As parent of the mentor, you are welcome at any time to call the parent of the special needs child, meet with the family, and/or accompany your child to their home until you feel comfortable with your child staying there alone. The parent of the special needs child takes full responsibility for supervising your child during this time. The Montville Recreation Department and Pathways for Exceptional Children cannot provide direct supervision of your child during the Home-Based Buddies Program and cannot assume legal responsibility of any kind during this time. As the children become friends, the families may choose to spend time together outside of the home. While Pathways is encouraged to see friendships evolve, we cannot assume any responsibility for monitoring or supervising these activities, which are up to the full discretion, supervision, and responsibility of the parents of the children involved.

**Certificates** are awarded to mentors at the end of each program with the number of community service hours they volunteered.



Cut and mail to : Pathways Mentor Program, 55 Madison Avenue, Suite 400, Morristown, NJ 07960. Questions? Call 973-331-3366 or visit [www.montvillepec.org](http://www.montvillepec.org)

## Pathways 2008-2009 Mentor Program Permission Slip

Mentor's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Emergency Contact Name & Phone \_\_\_\_\_

**Mentor has my permission to participate in :**

- Recreation
- Home-Based Buddies

**PHOTO RELEASE:** Pathways takes photos at events that we sponsor to use in our flyers, newsletters, website, brochures, presentations, and articles published in other newspapers and magazines about our programs. Please tell us how we may use your child's photo and name by checking the appropriate boxes below and signing your name. You may notify Pathways in writing at anytime if you wish to make changes.

I give Pathways for Exceptional Children permission to print my child's  photo,  name in conjunction with Pathways-sponsored events in: Pathways'  Newsletter,  Website,  Brochures & Presentations;  Township Publications;  Newspapers;  Local Weeklies.

List additional email address(es) to receive mentor newsletter: \_\_\_\_\_

**PARENT/GUARDIAN PERMISSION:** I have read and fully understand the details of the mentor program as written on the front and back pages of this form.

I, \_\_\_\_\_, give my child permission to participate in the programs checked.  
PRINT NAME

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ Date \_\_\_\_\_