Program Information

The Victory Academy Peer Mentor Program is a volunteer-based program at Victory Academy, a school dedicated to serving students with Autism and other learning differences. A Peer Mentor is a middle school or high school-aged student who is interested in helping others and enjoys being with children. Peer Mentors at Victory Academy help students by being a positive role model and friend. Peer Mentors serve many roles within the classroom and in the community. The program is designed to be mutually beneficial to the students at Victory Academy and the Peer Mentor. Peer Mentors take on leadership responsibilities in the classroom and help our students with everything from decision-making to recognizing how someone else feels.

What does a Peer Mentor do?
• Role model positive social skills.
• Encourage and support students.
• Engage in recreation activities with students such as swimming, sports, hiking, etc.
• Help students develop conversation skills.
• Give students the opportunity to meet new people with different interests and different school experiences.
• Play games, create art, and attend music classes.

How do I become a Peer Mentor?
☑ Complete the following application.
☑ Turn the application in to Kyna Brockett (kyna@victoryacademy.org) at Victory Academy by June 1st.
Peer Mentor Program Application

Peer Mentor Information

Name: ___________________________________________________ Date: ___________________

Guardian’s Name(s):______________________________________________________________

Address: _________________________________________________ DOB: ________________

DOB: ________________ Age: ________________

School: ________________________________________________________________________

Year in School: ________________________________

Peer Mentor Email: __________________________________________________________________

Guardian’s Email (s): __________________________________________________________________

Cell Phone: _____________________________ Home Phone: _____________________________

Guardian’s Cell Phone(s): __________________________________________________________

Do you have any allergies? _________________________________________________________

Are you currently taking any medication we should know about (such as medication you may need to have on campus)? : _____________________________

Do you have previous community service or volunteer experience? If so, please include program name, dates, and description of service on a separate sheet of paper (typed, double spaced).

Yes _____ No _____
School Policies

1. Victory Academy is a NUT FREE school. We have students with a variety of allergies. As a result, we respect those students safety by avoiding bringing nuts and having nut products on campus.

2. Victory Academy is not responsible for personal electronics. Students may bring phones for safety (ability to contact and communicate with parents, etc.) If the mentor chooses to bring a phone, he or she may keep the phone in the school safe during the day. Mentors are solely responsible for their personal belongings and Victory Academy is not responsible in any way for a mentor’s private property.

3. We ask mentors to respect the privacy of Victory Academy students and families by not discussing students with other people outside the mentorship program or posting photos of Victory Academy students on social media.

4. In order to comply with the health and safety standards set by the Oregon Department of Education, all volunteers are required to wear masks while at Victory Academy unless medical or religious exemptions apply. Student volunteers are NOT currently required to be vaccinated.

I have read and understand the school policies. By signing below, I agree to the school policies and will follow all school policies.

x____________________________________________________ Date:_____________
Signature of Peer Mentor

x____________________________________________________ Date:_____________
Signature of Guardian
**Essay Questions**

Please answer the following questions on a separate sheet of paper (typed, double spaced) and attach to your application.

1. How would you describe yourself?
2. What is your greatest strength?
3. In your own words, describe what Autism is. It is okay if you do not know.
4. Do you know anyone with Autism?
5. Why do you want to volunteer as a Peer Mentor to students with Autism?
6. Please describe from your perspective a typical day in the life of someone with Autism. Please include both the thoughts and feelings someone with Autism may have as they face each day.
7. What age of student would you be interested in working with? What types of things would you like to do as a Peer Mentor?
8. How will you use this experience to help others?

Please return the completed application to Kyna Brockett at Victory Academy. You may scan and email the documents to kyna@victoryacademy.org or you may mail the paper application to:

Kyna Brockett  
Victory Academy  
P.O. Box 428  
Tualatin, OR 97062