

SMART TECHNOLOGY MENTORS PROJECT

Student Application

School Name	e:
School Addr	ess:
Center for In	ndependent Living (CIL):
CIL Street Ac	ddress:
Eligibility:	Students must be at least 17-years of age, familiar with the use of the Internet, and in possession of their own transportation to and from residential service locations (within 10-miles of the high school).
Core Require	ements:
	d a three-hour Zoom training session in September of 2021 on the use of smart devices to aid older adults cople with disabilities (consumers) to live more independently.
Decem	e the sponsoring STMP Coordinator, your schedule of available after-school hours from September until nber to mentor consumers on the use of smart devices and to aid them in enrolling in cost savings programs their local utility provider.
	at the CIL 1-hour before the scheduled consumer home visit to review the operating instructions for the to be installed.
• Dress i	in business casual attire for the installation visit (no torn jeans, t-shirts, gym shoes or sandals).
• Compl	ete a post-visit evaluation form and submit same to the STMP Coordinator.
Student Nan	ne:
Student Add	lress:
Student Pho	ne Number:
Student Ema	ail Address:
Please list ar	ny special needs to accommodate your participation in the STMP:



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SCHEDULING: Please list available dates and hours between September and December 2021 to conduct in-home installation visits. Note: The more availability listed, the greater the chance of receiving multiple mentoring assignments. **In Case of Emergency** Contact Name: Contact Phone Number: _____ Parent's/Guardian's Name: Parent's/Guardian's Phone Number: Parent's/Guardian's Email Address: By signing below, I agree to dress appropriately (business casual) and to conduct myself professionally during my service as a Smart Technology Mentor. I acknowledge that the information given above is accurate and that I am at least 17years of age. I have disclosed any special needs and certify that I am in good health and have no medical condition preventing my safe participation in the Smart Technology Mentors Program. I commit to work the time arranged between the Center for Independent Living (CIL) STMP Coordinator and myself, and I agree to notify the Coordinator at least two (2) weeks in advance if for some reason I am unable to meet my obligation. Signature Date

Please email the completed application to doug.newman@silcresearch.org and place "STMP Application" in the subject line.

Applicants will be notified by email as to their acceptance into the Smart Technology Mentor training session by September 10th. The schedule of availability for the Fall mentoring services will be requested of all selected applicants at this time.