



*Creating New Worlds for Children and Adults with Deafness, Hearing and Vision Loss*

### **Job Description**

<b>Job Title:</b>	Deaf Mentor
<b>Location:</b>	Various locations, including via Zoom and areas around Michigan
<b>Duration:</b>	Hourly, as needed, 10 months (September – June)
<b>Pay Range:</b>	\$18.95 per hour
<b>Job Summary:</b>	<p>The Community Health and Literacy Program Mentor provides in-home educational services to families and individuals who are Deaf, Deaf-Blind, or Hard of Hearing. Mentors work under the supervision of the Community Health and Literacy Program Director.</p> <p>This is a 10-month position, with services delivered once per week for two hours per family. Work hours are assigned based on program needs and may vary week to week.</p>
<b>Key Responsibilities:</b>	<ul style="list-style-type: none"><li>• Teaches ASL to family members using specialized research-and evidence-based curriculum and resources.</li><li>• Able to respect the needs, values, and perspectives of families and to support families as they communicate and interact with their children.</li><li>• Demonstrates to families and caretakers of Deaf, Deaf-Blind, and Hard-of-Hearing children how to read various children's books using ASL.</li><li>• Host event(s).</li><li>• Refer to additional services as needed/requested.</li></ul>
<b>Qualifications:</b>	<ul style="list-style-type: none"><li>• Native or near-native fluency in American Sign Language (ASL) and thorough knowledge of Deaf culture.</li><li>• Experience working with children is highly preferred.</li><li>• Strong communication and organizational skills.</li></ul>
<b>Apply:</b>	If interested, please send your resume to <a href="mailto:theholleyinstitute@gmail.com">theholleyinstitute@gmail.com</a> with the subject line Deaf Mentor.

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Certificate/ Degree: \_\_\_\_\_

### References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Email: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Email: \_\_\_\_\_

### Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Email: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Email: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Email: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_