

Pinellas County School's Peer to Peer Mentoring Program

Contact information:

- a. Contact persons: **Michelle Roberge and Valerie Brimm**
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 - d. Website: **www.pcsb.org – community-mentoring**
 - e. Address: **301 4th street sw largo**
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2. Does your organization have 501(c)(3) Status? **No**

 3. What social issue(s) may students address through community service work at your organization?
Bullying, social media, peer pressure, social norms, gang affliction

 4. Do you have an age/grade requirement for volunteers? **Yes**
 - a. If yes, please specify: **Seniors and Juniors**

 5. What are some typical activities that students might perform if they complete community service hours with your organization? **Mentoring At-Risk Freshman Students**

 6. When can students volunteer at your organization?
 - a. Days of the week? **Bi-weekly – student's choice/mentee**
 - b. Typical number of hours per week available/required? **During school hours**
 - c. Times they may volunteer? **9:00am – 1:00 pm**
 - d. Do you have students volunteer during the summer months? **No**
 - e. Do you only offer community service hours during the summer? **Yes**