**KULULA PROJECT**
Succeed, Achieve, Accomplish

**PROJECT DESCRIPTION**

**Vision**
To implement a culturally enriched mentoring program for Black Students in Miami-Dade.

**Mission**
The Kulula Project aims at using an Afrocentric mentoring approach to enhance the development and cultural awareness of Black students in Miami-Dade.

**Program Overview**
Mentors will lead activities rooted in African culture and history that will cover important topics such as self-awareness, relationship building, skill development, leadership training, and community service.

**Goals**
- Increasing awareness of African heritage and culture
- Appreciating and valuing of self and self-esteem
- Developing relationship and interpersonal skills
- Fostering relationships with peers and community
- Increasing civic and community engagement
- Developing leadership skills
- Increasing college preparedness skills
- Have fun!

**Role of the Mentors**
Mentors will be trained to become culturally sensitive group leaders through training and curriculum instruction. Mentors are expected to encourage positive relationship building, facilitate group discussions, display positive behavior and most importantly connect with youths and connect with our community.
MENTOR APPLICATION

Name: __________________________________________________________
Address: __________________________ ____________________________
Birthday: __________________________ ____________________________
Year in School: ________________
Phone: ___________________________ Major: ______________________
Email: ___________________________ Minor: ______________________
Best way to contact you: _____________ Race/Ethnicity: _____________
Language(s) spoken: ________________ Gender: ____________________

DAYS/HOURS AVAILABLE

Monday ____ From _________ to _________
Tuesday ____ From _________ to _________
Wednesday ____ From _________ to _________
Thursday ____ From _________ to _________
Friday ____ From _________ to _________
Saturday ____ From _________ to _________
Sunday ____ From _________ to _________

EDUCATION

Name and location of high school and date of graduation:
_______________________________________________________________________________

Previous mentoring, or community experiences:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
1. Please describe the reasons why you would like to be a mentor for the Kulula Project:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. What skills do you believe you have that would make you a good mentor?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. What role do you think that race and culture play in the mentoring of youths?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. What role do you think that gender and other factors such as religion, sexual orientation, and ability, would play in mentoring of youths?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

REFERENCES
Please give the name, title, and phone number of three references.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please return this application to the Office of Dr. Guerda Nicolas, Merrick Building, 319-D. For any questions, please contact Billie Schwartz at kululaproject@gmail.com.