

DROJAM

Dr. John Arrington Mentoring Program

Student Handbook

2018-2019

Name: _____



Dr. John Arrington Mentoring Program

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Dr. John Arrington Mentoring Program

**PROGRAM
INFORMATION**



Dr. John Arrington Mentoring Program

Who is Dr. John Arrington?



Dr. John Arrington has dedicated his life to improving the educational and social well-being of children throughout the San Diego Unified School District. He has had a commitment to educational excellence throughout his distinguished career.

John began his educational training by earning his Bachelor of Science degree from Tuskegee University in 1963. He received his Master's degree in school administration from San Diego State University in 1974, and his Ph.D. in school administration from U.S. International University in 1977. He also received training from the Howard University School of Law in 1967, and he earned a counseling credential from San Diego State University in 1972.

John has distinguished himself as a teacher, counselor, and administrator for nearly 30 years, serving as district administrator, vice-principal, and principal in the San Diego Unified School District.

Nationally recognized for his work, John has been honored by the Administrators Association, Omega Psi Phi Fraternity, Kiwanis International, the Association of California School Administrators, and the Parent Advisory Task Force.

He has also been an active participant in helping to improve living conditions in his community, notably as a leader and officer of the Southeast Kiwanis Club. The club has helped the disadvantaged in Southeast San Diego by giving away scholarships, clothing for the homeless and mentoring children at Morse and Lincoln High School, Keiler Middle School and Fulton Elementary School.

He is married to Bernice Arrington and they have four children, Darryl, Pamela, Rusty and Jonathan. He was born and raised in Laurel, Mississippi. He is a member of Omega Psi Phi Fraternity.



Dr. John Arrington Mentoring Program

Background

Program Overview

Omega Psi Phi Fraternity, Inc. was founded on the evening of November 17, 1911, on the campus of Howard University in Washington, D.C. The fraternity was founded on the cardinal principles of Manhood, Scholarship, Perseverance, and Uplift.

The Phi Omicron Chapter of Omega Psi Phi Fraternity, Inc. was chartered November 1, 1949. The mission of our chapter is to be the foremost fraternal organization in San Diego in service, professionalism, and brotherhood. We aim to increase cultural acumen and positively impact the community of San Diego through community service and civic duty.

The Dr. JAM Program was started in 2007 to address concerns our community had with the youth. The program is named after Dr. J. Arrington, a member of the Phi Omicron chapter who has been a community leader in the arenas of education and religion.

Mission Statement

The mission of the Dr. JAM Program is to work with African-American males between the 6th and 12th grade in the areas of character development, academic success, cultural awareness, and social service.

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**MONTHLY
MEETINGS**



Dr. John Arrington Mentoring Program

Dr. JAM Kickoff

Every Dr. JAM Program Meeting will start with the following “Kickoff”

- **Prayer:** Every meeting will begin with a prayer conducted by a Mentor or Mentee
- **Black National Anthem:** Mentees must know the Black National Anthem and sing at each meeting
- **Dr. JAM Program Motto:** Mentees will recite the Dr. JAM Motto each month
- **Nguzu Saba:** Mentees will recite the seven principles and their meanings
- **Poem /Quote:** Each Mentee will recite a poem or quote of their choosing monthly
- **Officer’s Report:** The Kickoff will end each month with the Secretary reporting a summary of events from the previous month
- **Monthly Discussion Topic:** Each month the group will be given a current affairs topic to discuss within the group ^{new}



Dr. John Arrington Mentoring Program

Lift Every Voice and Sing

Lift ev'ry voice and sing,
Till earth and heaven ring.
Ring with the harmonies of Liberty;
Let our rejoicing rise,
High as the list'ning skies,
Let it resound loud as the rolling sea.
Sing a song full of the faith that the dark past has taught us,
Sing a song full of the hope that the present has brought us;
Facing the rising sun of our new day begun,
Let us march on till victory is won.

Stony the road we trod,
Bitter the chast'ning rod,
Felt in the days when hope unborn had died;
Yet with a steady beat,
Have not our weary feet,
Come to the place for which our fathers sighed?
We have come over a way that with tears has been watered,
We have come, treading our path through the blood of the slaughtered,
Out from the gloomy past,
Till now we stand at last
Where the white gleam of our bright star is cast.

God of our weary years,
God of our silent tears,
Thou who has brought us thus far on the way;
Thou who has by Thy might,
Led us into the light,
Keep us forever in the path, we pray.
Lest our feet stray from the places, our God, where we met Thee,
Lest our hearts, drunk with the wine of the world, we forget Thee,
Shadowed beneath thy hand,
May we forever stand,
True to our God,
True to our native land.



Dr. John Arrington Mentoring Program

Dr. JAM Motto

“In the depths of wisdom abounds knowledge. Knowledge is divine! So I lend my ear to listen, my heart to the respect of my people, and my soul to the preservation of my culture.”

- By Dan P. Falconer



Dr. John Arrington Mentoring Program

Nguzu Saba

1. Umoja (Unity) *"To strive for and maintain unity in the family, community, nation, and race."*
2. Kujichagulia (Self-determination) *"To define ourselves, name ourselves, create for ourselves, and speak for ourselves instead of being defined, named, created for, and spoken for by others."*
3. Ujima (Collective Work and Responsibility) *"To build and maintain our community together and make our sisters and brothers' problems our problems and to solve them together."*
4. Ujamaa (Cooperative Economics) *"To build and maintain our own stores, shops, and other businesses, and to profit from them together."*
5. Nia (Purpose) *"To make our collective vocation the building and developing of our community in order to restore our people to their traditional greatness."*
6. Kuumba (Creativity) *"To do always as much as we can, in the way we can, in order to leave our community more beautiful and beneficial than we inherited it."*
7. Imani (Faith) *"To believe with all our heart in our people, our parents, our teachers, our leaders, and the righteousness and victory of our struggle."*

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**MENTEE
TOOLS**



Mentee Responsibilities

- I commit to a year (Oct – May) of the Dr. JAM Program
- I commit to respecting myself, my family, and the program at all times
- I commit to attending all Dr. JAM events or providing an authorized excuse (1 week prior to the event, only 2 per year)
- I commit to being on time for all meetings and arriving prepared for the meetings
 - Binder
 - Required Material
 - Pencil and/or Pen
 - Proper Attire
- I commit to having communication monthly with my Dr. JAM Brothers
- I commit to spending four hours a month with my mentor
- I commit to doing two book reports due in January and April
- I commit to bringing my monthly progress report to each Dr. JAM meeting

Mentee Name

Dr. JAM Chairman Name

Mentee Signature

Dr. JAM Chairman Signature



Dr. John Arrington Mentoring Program

Dr. JAM Uniform and Attire

Dr. JAM Members are expected to be in their Dr. JAM uniforms at every Dr. JAM event. There are 3 different uniforms.

- **Dr. JAM Formal:**
 - Black Dress Shirt
 - Black Dress Slacks
 - Purple/Gold Dr. JAM Tie

- **Dr. JAM Business Casual**
 - Dr. JAM Polo
 - Black/Khaki Pants

- **Dr. JAM Casual**
 - Dr. JAM T-Shirt
 - Jeans



Dr. JAM Officers Roles and Responsibilities

The Dr. JAM Program officers are elected by the Dr. JAM members. This board is comprised of five positions.

– **President**

- Schedule board meetings
- Preside over board meetings
- Set agenda for meetings
- Serve as liaison for mentees and other organizations

– **Vice President**

- Take on the responsibilities of the president when he is not present

– **Secretary**

- Keep minutes from all meetings
- Contact all mentees before all events
- Maintains the group calendar

– **Treasurer**

- Keep track of the groups finances

– **Historian**

- Writes a report detailing all events
- Takes pictures at all events



Dr. JAM Program Officers

2018-2019 Dr. JAM Program Officers

- **President**
- **Vice-President**
- **Secretary**
- **Treasurer**
- **Historian**



Dr. John Arrington Mentoring Program

Ground Rules

Ground rules for the Dr. JAM Program Meetings:

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CALENDAR



Dr. John Arrington Mentoring Program

Calendar Communication

The calendar is on the Dr. JAM Page of the Baja Ques website. When you subscribe to the calendar you will get updates and reminders dynamically.

Calendar Address

<http://www.bajaques.com/drjam/drjam-calendar>

GroupMe

<http://bit.ly/DrJAM>



Dr. John Arrington Mentoring Program

Locations

- Christian Life Center of San Diego (*Monthly Meeting Location*)

9617 Campo Road

Spring Valley, CA 91977

-George Stevens Senior Center

570 South 65th Street

San Diego, CA 92114

-Jackie Robinson YMCA

151 YMCA Way

San Diego, CA 92102

-Neighborhood House Association (NHA)

5660 Copley Drive

San Diego, CA 92111

-San Diego State University (SDSU)

5500 Campanile Drive

San Diego, CA 92182

-San Diego Urban League

720 Gateway Center

San Diego, CA 92102

-University of San Diego (USD)

5998 Alcalá Park

San Diego, CA 92110

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**CONTACT
INFORMATION**



Dr. John Arrington Mentoring Program

Contact Information

Dr. JAM Chairman / Parent Liason

Quentin Davis

E-mail: Drjamentoring@gmail.com

Quentin (858) 736-4233

Dr. JAM Education Liaison

Dan Falconer

E-mail: kamaruque96@yahoo.com

Phone: (619) 757-5917

Dr. JAM STEM Liaison

Robert J. Rush

E-mail: 619jakey@gmail.com

Phone: (619) 675-6634

Dr. JAM Community Service Liaison

Joseph Cummings

E-mail: joecummings@aol.com

Phone: (360) 908-8431

Chapter Information

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**GUARDIAN
FORMS**



Dr. John Arrington Mentoring Program

Guardian Release Form

Dr. JAM Program appreciates you and your child's interest in becoming a mentee. This application is intended as a means of informing and gaining the consent of the parent/guardian to allow his and/or her son to participate in the Dr. JAM Program.

Please initial each of the following:

_____ I give my informed consent and permission for my child to participate in the Dr. JAM Program and its related activities.

_____ I agree to have my child follow all mentoring program guidelines and understand that any violation on my child's part may result in suspension and/or termination of the mentoring relationship.

_____ I hereby acknowledge that my child may be transported by his mentor and/or Dr. JAM mentors while participating in the Dr. JAM Program, and that such transportation is voluntary and at his/her own risk.

_____ I release the Dr. JAM Program of all liability of injury, death, or other damages to me, my child, family, estate, heirs, or assigns that may result from his participation in the program, including but not limited to transportation, and hold harmless Omega Psi Phi Fraternity, Inc., any Dr. JAM mentor, program staff, or other representatives, both collectively and individually, of any injury, physical or emotional, other than where gross negligence has been determined.

_____ (optional) I agree to allow Dr. JAM to use any photographic image of my child taken while participating in the mentoring program. These images may be used in promotions or other related marketing materials.

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

Parent/Guardian Signature:

Date:



Dr. John Arrington Mentoring Program

AUTHORIZATION TO RELEASE STUDENT INFORMATION

Student's Name: _____ Date: _____

School: _____

I hereby grant permission for Dr. JAM Program to make contact with my child and conduct a personal interview for the purposes of applying to be a mentee. A Dr. JAM Program representative may also make contact with my child on school premises for the purposes of screening and interviewing as well as ongoing support of his participation in the mentoring program.

I authorize Dr. JAM Program to obtain any needed information regarding my child from his school's staff, including academic and behavioral records, and conversations with teachers, counselors, and other administrative staff.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name: _____

Address: _____

City _____ State _____ Zip _____