

MENTORING PROGRAM

Mentor Information Form

Na	ime:		
Ce	Il Phone:		
Gr	aduation year:	Major/Minor:	
Сс	mpany:		
Tit	le:		
Inc	Justry:		
	mmunication, govern	nost interested in mentoring? (i.e. finance, accounting, sports, nonprofit, the arts, iment, healthcare, higher education).	
Lis		2S:	
W	nat is your weekly av	ilability?	
Нc	w often are you willi	ng to meet?	
W	nat type of relationsh	ip would you like to have with your protégé?	
Sh	ort term:	Long term:	
In [.]	the attributes below,	I would rate myself predominately(please select one in each row)	
1.	Intuitive	Analytical	
2.	Extrovert	Introvert	
3.		Cautious	
4.		Methodical	
5.	Plans ahead	Spur of the moment	

Would you be willing to include a student in your work activities such as shadowing, attending meetings, etc.?

You prefer which of the following means of communication? Check all that apply. (Please note the expectation is three face-to-face meetings per semester)

Email 🛛

Phone 🛛

Skype/Face Time

In person \Box

Texting 🛛

Which of the following aspects of mentoring most interests you?

	Strongly				Not
	<u>Interested</u>		<u>Neutral</u>		<u>Interested</u>
Offering career advice, support, and guidance	1	2	3	4	5
Providing general life and soft skills support	1	2	3	4	5
Moral support and encouragement	1	2	3	4	5
Sponsorship and/or long term relationship	1	2	3	4	5
Other:					

Please submit your resume with your application.

