

# THE MENTOR PROGRAM

## Mentor Application\*

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

TELEPHONE: HOME: \_\_\_\_\_ WORK: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

OCCUPATION \_\_\_\_\_

DESCRIPTION OF WORK AND RESPONSIBILITY: \_\_\_\_\_

\_\_\_\_\_

What careers would you feel comfortable advising? \_\_\_\_\_

In what capacity do you think you can be helpful in this Program? \_\_\_\_\_

\_\_\_\_\_

I recommend the following student for this Program: Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

I agree to serve as a Mentor, and will assist a designated Student/Mentee for one year.

I agree to call her personally, and make an attempt to meet with her at least once.

\_\_\_\_\_ Signature of Mentor \_\_\_\_\_ Date

*\*Open only to NOIAW members.*