



Date:

Please answer the questions below so your student mentee can begin to learn a little bit about you.
We will also keep this on file for our records.

Name: _____ Gender: ___F ___M

Local Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Phone number: _____ Cell phone: _____

Preferred way to be contacted (e.g., email, cell phone): _____

Career area: _____

Church: _____

Educational Background (optional): _____

Hobbies, interests, volunteer activities: _____

Have you experienced mentoring, either as a mentor or as a mentee, in the past? If so, please describe the experience:
