

Mentor Application

Deadline Date: May 3, 2019

Thank you for your interest in the Mentoring Program. Please begin by introducing yourself, highlighting your strengths, and acknowledging your areas of improvement. Your application will address your reasons for wanting to participate in the program as well as what you are hoping to achieve through the program. You will conclude by writing a brief summary of your future plans or career direction.

General Information:		
Full Name:		
Employee ID:		
Department:		
Email Address:		
Phone Number:		
I understand the time commitment required for	or this program: Yes:	
Have you ever been a mentor? Yes:	No:	
Have you ever been a mentee? Yes:	No:	
Work Experience:		
Current position:		
Years in current position:		
Years at UND:		
Email Address:		
List what you are involved in at UND (e.g. co		



Program Specific Questions:

Describe your reasons for participating in the Mentoring Program:							
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Highlight your areas of strength:					
Address you	r areas for improv	vement:			



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. Where do you see yourself in 1, 3, and 5 years professionally:				
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Describe you	i ilobbies/leisure ili	ieresis.		



List any community activities you are involved in:					

Thank you for completing the application for the Mentoring Program. Please email your APPLICATION along with your RESUME and your SUPERVISOR'S LETTER OF SUPPORT to ttada@UND.edu. Your application will not be processed until all materials are received.

We will be reviewing applications from May 6-10. Participants will be notified of their acceptance into the program as well as who their match will be no later than May 15.