



MENTOR APPLICATION

Name		Date	
E-mail		Phone #	
Emergency Contact Name/Phone #			
SAME Membership Level: # years as SAME member:	Fellow Member	Young Member	
Mentee Preferences: No preference	No preference College Student (Year:) Scholarship Recipient	Young Member SAME Member	
	No preference Same gender (M F) Similar interests Other (indicate):	Specific school Specific profession	
Why do you want to be a mentor?			
What are your mentoring experiences? What can you contribute?			
What do you hope to accomplish as a SAME Mentor?			
Present position (Briefly describe role/responsibilities, length of service, etc):			
Describe your work and technical skills.			
Additional experience			
Licenses and Certifications			
Education			
Continuing Education			
Involvement in SAME			
What are your passions, hobbies, talents and interests?			
Reading (Genre): _____		Music (Genre): _____	
Outdoor activities: _____		Sports: _____	
Volunteer (describe): _____			
Other (indicate): _____			
Please send applications to Elisa Hammer: elisa.hammer@me.com			
Signature:			