



P² Collaborative of Western New York

MENTOR APPLICATION

Personal Information:

Name _____ Gender Male
 First Middle Last Female

Address _____
 Street City State ZIP

Home phone _____ Mobile phone _____

Name/address of employer

Work phone _____ Occupation _____

E-mail address _____

Volunteer Information:

1. What do you feel are the strengths (bilingual, math skills, previous relevant volunteer experience, etc.) you can bring to this program?

2. Write a brief statement on why you have chosen to participate in the mentor program.

3. Initial the two statements below:

_____ I understand that the mentor program involves spending a minimum of 25 hours over the course of the academic year.

_____ I understand that I will be required to attend 1 or 2 networking events



4. Skills and Expertise (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Grant/Scholarship Writing | <input type="checkbox"/> Advocacy |
| <input type="checkbox"/> Interview Skills | <input type="checkbox"/> Life coaching/Consulting |
| <input type="checkbox"/> Resume Development | |
| <input type="checkbox"/> Other (please specify) _____ | |

5. Background /Field

- | | |
|---|--|
| <input type="checkbox"/> Master's in Public Health | <input type="checkbox"/> Clinical |
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Health Administration |
| <input type="checkbox"/> Dietician, Health & Wellness | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Advocacy/Community Work | |

6. Why do you want to become a mentor?

7. What is the best time for you to volunteer? (check all that apply):

- Mornings Afternoons Evenings Weekends

8. Do you speak a foreign language? _____ If yes, please specify: _____

9. Please list any hobbies or interests you may have: _____

10. What would you like to do with a mentee?

11. What clubs or groups, if any, do you belong to?

12. What qualities would you like in a mentee?

13. What individual has served as a role model for you? Why?

14. If you could recommend one book for your mentee to read, what would it be?



Please send all applications to info@p2wny.org or mail to the address below:

P² Collaborative of WNY
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