Multicultural Academic & Support Services
Mentor Application

Personal Information

Name: ________________________________  Date: __________
Male _______ Date of Birth: ________________
Address: _____________________________  Phone: ________________
_________________________  Email: ___________________________

Major_______________  Minor _________________  Current GPA_______

Will you be employed this academic year?  Yes/No
If so, where will you be employed? ________________
What will your position be? ________________
How many hours per week will you be working?
0-9hrs. /wk  10-19hrs./wk  20-29hrs./wk  30-40hrs./wk

List your Clubs/Organizations and your leadership role in each (if applicable):
1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________
5. __________________________________________

Character Information

Name your personal interests: (favorite sport, hobbies, recreation, or other activities):
________________________________________________________________________
________________________________________________________________________

Why do you feel you will be effective MASS Mentor?
________________________________________________________________________
________________________________________________________________________

Why do you feel mentorship is important, for both mentor and mentee?
________________________________________________________________________
________________________________________________________________________
What do you hope to gain from this experience?

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Please describe a mentoring (as a mentor or mentee) experience you have had. Be specific and explain how you believe this will effect you as a mentor, as well as what your objectives will be as a mentor.

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Is there any other information about yourself that would help us in matching you?

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________________________________________________________________________
________________________________________________________________________

I agree, if accepted as a mentor, to follow the mentoring rules and regulations set forth by the MASS Office and I will also adhere to all UCF policies, which if violated, could affect my status as a mentor in the program. In addition, I will attend the mentoring training session on Saturday, Sept. 26, 2009.

____________________    ______________________
Print Name         Signature