# BAC Mentor/Mentee Application



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| Contact Information |
|  |
| Name |  |
| Street Address |  |
| City, ST, ZIP Code |  |
| Cell Phone |  |
| Work Phone |  |
| E-Mail Address |  |

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| Areas of Expertise |
| Please list your top three areas of expertise. |
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| 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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| Interests |
| Tell us in which areas you are interested in as a Mentor |
|  |
| All |
| Accounting |
| Facilities |
| Fundraising |
| Emergency Prep |
| Capital Construction |
| Policy Issues |
| Other Please List |

Tell us in which areas you are interested in as a Mentee

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| --- |
| All |
| Accounting |
| Facilities |
| Fundraising |
| Emergency Prep |
| Capital Construction |
| Policy Issues |
| Other Please List |
| CTC Experience |
| Summarize special skills and qualifications you have acquired from being employed in CTC system. |
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| Previous Experience  |
| Summarize special skills and qualifications you have acquired from other employment, previous volunteer work, or through other activities. |
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| Signature |
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|  |
| Signature |  |
| Date |  |

Thank you for completing this form and for your interest in participating in the BAC Mentoring Program.