



**OSPREY BUSINESS MENTORSHIP  
PROGRAM**  
Mentee Information Form

Name:

Stockton Z #:

Personal Email:

Cell Phone:

Major:

Expected graduation date (Undergrad):

Expected graduation date (Grad):

Home/Permanent Address:

Campus Address (if applicable):

What industry are you most interested in receiving a mentor for? (i.e. finance, accounting, sports, nonprofit, communication, government, healthcare, higher education, etc.)

Briefly summarize your educational and career goals:

List your favorite hobbies:

What is your weekly availability?

How often are you willing to meet?

What type of relationship would you like to have with your mentor?

Short term:

Long term:

In the attributes below, I would rate myself predominately (please select one in each row)

Intuitive	Analytical
Extrovert	Introvert
Risk-taking	Cautious
Decisive	Methodical
Plans ahead	Spur of the moment

Which of the following means of communication do you prefer? Check all that apply. (Please note the expectation is 3 face-to-face meetings per semester)

Email      Phone      Skype/FaceTime      In Person      Texting

Which of the following aspects of mentoring most interests you?

	<u>Strongly Interested</u>		<u>Neutral</u>		<u>Not Interested</u>
Receiving career advice, support, and guidance	1	2	3	4	5
Receiving general life and soft skills support	1	2	3	4	5
Moral support and encouragement	1	2	3	4	5
Sponsorship and/or long-term relationship	1	2	3	4	5

Other:

Please submit your resume with your application.

Applications can be emailed to Susan Wallace at [susan.wallace@stockton.edu](mailto:susan.wallace@stockton.edu).