

FRED L.E.A.D.S. Mentor Program Application

Date _____

Personal Information

Full Name: _____
Last First M.I.

Campus Address: _____
Building and Room number

Original hometown: _____
City

Cell Phone: _____ Can we text you? _____

Preferred Email: _____

F#: _____

Gender: _____ Pronouns: He She They Other

Program Information

Class Standing: _____ First Year Transfer Other

Program/Major: _____ Minor: _____

Will you work this semester? _____ If so how many hours? _____

Personal Characteristics

Career Goals: _____

Would you like a mentor with the same major if possible? _____

Mentor Gender Preference?
We will try to accommodate this as best as possible but cannot make any guarantees Yes or No If yes, please specify: _____

Hobbies, activities, interests: _____

What other aspects about yourself would be helpful to match you with a mentor? _____

What do you expect to gain from this experience? _____