



MENTOR QUESTIONNAIRE

Name:

Title:

Email:

Office Phone Number:

Office Address:

is interested in this program because:

Are you willing to act as a mentor for *Yes* *No*

Expectations of the Mentoring Program

How long? 6-months minimum commitment.

Are you willing to commit to the 6-months minimum timeframe? *Yes* *No*

How much time? You decide with your mentee; 1-4 hours/month is recommended.

Are you willing to commit 1-4 hours per month to meeting with your mentee? *Yes* *No*

Please return completed form to Ames Lab Human Resources, 105 TASF.