



MENTOR PROGRAM APPLICATION

(PLEASE TYPE OR PRINT)

Date: _____

Name: _____ DOB: _____ Bar Number: _____

Firm/Company Name (if applicable): _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Law School: _____ Graduation Date: _____

Undergraduate Institution: _____ Major: _____

Hometown City & State: _____ Veteran? _____

I am applying to become a : (check all that apply):

- Mentee (Law Student)
 Mentee (Attorney)

- Mentor to Student
 Mentor to Attorney

Have a career before law school? _____ What industry and how long? _____

Date of first admission in any jurisdiction: _____ Are you in court often? _____

Mentored Previously? _____ Where? _____

Please identify the practice in which you work or hope to work:

- | | |
|--|---|
| <input type="checkbox"/> Solo Practitioner | <input type="checkbox"/> Corporate Counsel |
| <input type="checkbox"/> Small Firm (2-10 Attorneys) | <input type="checkbox"/> Med Firm (11-20 Attorneys) |
| <input type="checkbox"/> Large Firm (20+ Attorneys) | <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Government | <input type="checkbox"/> State |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Federal |

My current area(s) of practice or the area(s) I am interested in:

- | | |
|---|---|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Intellectual Property |
| <input type="checkbox"/> Antitrust | <input type="checkbox"/> Juvenile |
| <input type="checkbox"/> Bankruptcy | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Business law | <input type="checkbox"/> Litigation |
| <input type="checkbox"/> Collections | <input type="checkbox"/> Personal Injury |
| <input type="checkbox"/> Corporate/In-House Counsel | <input type="checkbox"/> Probate/Estate Planning |
| <input type="checkbox"/> Criminal Law | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> ADR/Mediation | <input type="checkbox"/> Securities |
| <input type="checkbox"/> Family Law | <input type="checkbox"/> Tax |
| <input type="checkbox"/> Environmental | <input type="checkbox"/> Transactional |
| <input type="checkbox"/> Immigration | <input type="checkbox"/> Worker's Compensation |
| <input type="checkbox"/> Indian Law | <input type="checkbox"/> Other (be specific): _____ |

As a law student, what do you hope to gain from a mentor experience?

Please tell us about any law school organizations, journals or activities that you participate(d) in?

Do/did you have any challenges or struggles in law school (e.g. low grades, health issues, started a family, etc)? If so, please explain:

*Please note this information is confidential and will only be seen by the TCBA Mentorship Committee

Would you would be willing to discuss this with students/attorneys facing similar situations?

The Guidelines for Mentors and Mentees are attached.

I certify that I have read and am familiar with guidelines and requirements for the Tulsa County Bar Association Mentor Program and that I will abide by the guidelines currently in force as they may be amended from time to time by the Mentor Committee.

Signature of Applicant

Date

Please return to:
Tami Williams
Tulsa County Bar Association
1446 S Boston Ave
Tulsa, OK 74119
tamiw@tulsabar.com