



VOLUSIA PROUD MENTOR PROGRAM

MENTOR APPLICATION

Thank you for your interest in the **Volusia Proud Mentor Program**. This application will allow us to successfully match our mentees with experienced executive volunteer mentors.

This program is designed to connect and engage our local college students and professionals with business owners and other individuals in the business community. Our hope is that by forming relationships, establishing connections and learning about all of the resources available, our local talent will be more likely to find employment or pursue their own ventures in Volusia County.

Please e-mail the Volusia Proud Mentor Program (VPMP) team if you have any questions about this application (vpmp@volusiaproud.com).

First Name: _____ **Nickname:** _____ **MI:** ____ **Last Name:** _____

Suffix: _____ **Salutation:** _____ **Gender:** Male Female
(Sr., Jr., III) (Mr., Mrs., Ms., Dr.) (Optional)

Ethnicity: *(optional) (Please check all that apply)*

- Hispanic or Latino Descent American Indian or Alaska Native Asian
 Black or African American Native Hawaiian or Other Pacific Islander White Other

Current Employment:

Company: _____ Title: _____

Industry: _____

Years in this position: _____ Years with this company: _____

Areas of Expertise: _____

Do you have more than 10 years of work experience since attaining your undergrad? Yes No

LinkedIn Profile: _____

Please attach your Resume to this application: Attached

Volusia PROUD

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MENTOR PROGRAM

Company Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Other Phone: _____

Email Address: _____

Home Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Preferred method of contact: _____

Academic Information:

Undergraduate University Name: _____

Undergraduate Degree Earned: _____ Year: _____

Graduate University Name: _____

Graduate Degree Earned: _____ Year: _____

Other Relevant Education: _____

The following person has recommended me for this program: (optional)

Name: _____

Title: _____

Company: _____

Email: _____

Phone: _____

Volusia PROUD | MENTOR PROGRAM

Hobbies / Interests / Community Involvement:

What are your goals and anticipated benefits of being part of this program?

I prefer to mentor a person who has/is pursuing a degree or career in:

Desired location of mentee (city): _____

Do you have a gender preference for a mentee? Male Female No preference

By checking this box and submitting this application you acknowledge that the information is true and accurate to the best of your knowledge.

Participants agree to indemnify Volusia Proud Mentor Program from any liability arising from participation in the program, whether the result of the negligence of any party or the intentional conduct of other participants, to include mentors.

Signature: _____ Date: _____

Return application to Volusia Proud Mentor Program Team (vpmp@volusiaproud.com).