

Lake County Chamber of Commerce Year of Youth Mentorship Application (Mentor)

Name:

Phone number:

Email address:

Are you bilingual? Yes No

Please indicate the field in which you work:

Please list your strengths/skills and areas of interest:

Please indicate which days of the week and time frame you're most available for one-on-one meetings with your mentee:

Monday

Morning Afternoon Evening

Tuesday

Morning Afternoon Evening

Wednesday

Morning Afternoon Evening

Thursday

Morning Afternoon Evening

Friday

Morning Afternoon Evening

Saturday

Morning Afternoon Evening

Sunday

Morning Afternoon Evening

Please write an introduction about yourself (200-500 words), why you're interested in participating, and what you feel you can contribute to the mentorship program: