|  |
| --- |
| CONTACT INFORMATION: |
| Name:  |
| Organization:  | Title:  | Current Member of AFP Chicago (Yes/No):  |
| Organization Address: |
| City: | State: | ZIP Code: |
| Home Address:  |
| City: | State: | ZIP Code: |
| Telephone: (Day): | Telephone: (Evening/Cell): | Years in Development:  |
| Email Address:  |
| I have access to a car and am willing to travel to meet my mentor (Yes/No):  |
| My travel time by car should be no more than: [ ]  No preference [ ]  30 mins [ ]  60 mins [ ]  No preference [ ]  30 mins [ ]  60 mins  |
| I am willing to travel: [ ]  No preference or (*check all that apply*) [ ]  North [ ]  South [ ]  West [ ]  East  |
| SPECIAL MENTORING INTERESTS: |
| Check the reasons you are seeking a mentor:[ ]  I am interested in diversifying my development skills[ ]  I am interested in increasing racial/cultural diversity among my board, volunteer and donor base.[ ]  I would like assistance charting my career path.[ ]  I am new to the area and need to build a network of people for assistance for specific projects.[ ]  Other:  |
| I would like to be elected to participate for the following reasons:  |
| Please indicate three specific measurable goals you would like to accomplish with the assistance of a mentor *(use as much space as you need):* |
| [ ]  Please **do not** include my match information in the “Members On The Move” section of the AFP Chicago newsletter.[ ]  If selected, I will attend the mandatory kick-off event. (Details available on our website.)  |
| [ ]  I have read the program details and am committed to participating for one full year: |
| Signature of applicant: | Date: |

**Please EMAIL this application and a copy of your resume to peer-mentoring@afpchicago.org**

or mail it to AFP Chicago Chapter Office; 1717 North Naper Blvd, Suite 102, Naperville, IL 60563



A very special thank you to our sponsor: