



MENTORING PROGRAM ~ MENTEE APPLICATION

Date: _____

Name _____

Home Address _____

Home# _____ Work# _____ Fax _____

Email: _____

Organization _____

Duties _____

Years at present organization _____ Years in Jewish Communal Service _____

Educational Achievement _____

With what Jewish denomination do you identify, if any? _____

Interests and hobbies?

Area of interest in Jewish Communal Service (i.e., Clinical, Group Work, Community Organization, Education, Policy, etc.)

What type of person would you generally seek out to discuss professional and/or personal issues or concerns (i.e., personal style, professional experience, relationship to you, etc)?

What issues or topics would you like to address with a mentor?

In what areas are you most interested in growing professionally?

Why do you want a mentor, or in what way do you think this relationship will be most beneficial to you?

Specific mentor requests

Please attach a current resume or curricula vitae.

PLEASE SCAN or EMAIL THIS FORM TO:

Cindy Goldstein

cgoldstein@thedfi.org Questions? Call 410-843-7563