



Fusion Five

Fusion Five Mentorship Application

Please complete the form below in its entirety. Your answers will be used to determine the best mentor pairing for you.

First Name *

Last Name *

Email *

Home Phone *

Place of employment. *

Current role held. *

Would you prefer your mentor to be from your industry or a similar background? *

What areas(s) of growth are you most interested in? Select all that apply. *

- ☐ Career Growth
- ☐ Personal Growth
- ☐ Community Engagement and involvement
- ☐ All of the Above

What are your long term goals professionally and/or personally? *

What is most important to you in a mentorship pairing? *

What knowledge gained, or outcome, of participating in this program would make you feel your mentor pairing was successful? *

you feel your mentor pairing was successful:

Is there any other expectations or thoughts you would like us to know about that will help us make the best mentor pairing for you? *

What time(s) of day works best for you to meet? *

- ☐ Breakfast (Before work)
- ☐ Morning
- ☐ Noon (Lunch)
- ☐ Afternoon
- ☐ Evening
- ☐ Anytime

In a few sentences, share a short bio about yourself, your accomplishments, and your aspirations. *

Please upload a headshot or photo. *

 Upload Files

Please sign your full name below. By doing so, you are indicating that you have read the resources guide provided and understand the program requirements and expectations, that you are a current and up to date member of Fusion Five, and are committing to the program for its duration. *

Signature Date and Time. *

Submit

Contact Us

Fusion Five

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<https://www.facebook.com/fusionfiveswla>

