Veteran Resource Center 2015-2016 Veteran Academic Mentorship Program

PARTICIPANT INFORMATION FORM

Name:	UID number: U
Major:	Department:
Advisor:	Expected Date of Graduation:
Home Address:	E-mail:@memphis.edu
	E-mail (personal)
City:	Mobile Phone:
State Zip:	Home Phone:
accurately as possible. I would like to be:	more about you. Please answer the following questions as
Please provide the following: For the spring 2016 semester I am enrolled:	art-time (1-6 hrs.) Full-time (12+ hrs.)
My classification is:FreshmanSophomor	reJuniorSenior
What branch did you serve in?	
What was your job?	Did you deploy? Yes / No
1. A brief description of your career background.	
I have years of experience in the field of	
Are you currently employed? Yes No	Employment Status: Full-time Part-time
If you are employed please indicate where below.	
more than one. O Helping a veteran student with finding univ O Helping a veteran student with becoming n	-
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	O Other:
3.	As a mentor, what are some characteristics that you would like to enhance? You may mark more than one. O Leadership skills
	O Effective Communication
	O Confidence/ Self-motivation
	O Decision Making skills
	O Time Management
	O Computer Skills
	O Other:
4.	What are your plans after graduation?
5.	List things you enjoy doing /hobbies.
).	Are you currently involved in any extracurricular activities and/or student organizations? Please list.
	Are you a current member of the Student Veteran Organization (SVO)? Yes No
	Mentors are generally upperclassmen veteran students who will be able to serve as a source of support, advice and guidance for incoming veteran freshmen and/or new veteran transfer students.
	Why would you like to serve as a mentor and be a part of the Adult and Commuter Student Services Veteran Mentoring Program? How will you work being a mentor into your schedule? One or two sentences are sufficient.
	ase e-mail your application to veterans@memphis.edu or fax to (901) 678-4207. You may also bring a copy to the VRC or il a copy to:
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