



AIA Northeast Illinois

MENTOR PROGRAM ENROLLMENT FORM

A Mentor is willing to provide guidance and recommendations to help the mentee develop professional skills.

MENTOR PROFILE

Name: _____

Job Title: _____

Organization: _____

Organization City/State: _____

Office Phone: _____ Cell Phone: _____

Email Address: _____

Best time to call: _____ Years of experience: _____

Professional certifications/memberships held: _____

Briefly describe your job responsibilities and areas of architecture of special interest to you.

Why do you want to participate in the AIANEI Mentor Program?

What do you expect from your mentee?

Each participant in a mentoring partnership should be committed to devoting time and effort to develop their mentoring partnership. They need an understanding of their role and responsibilities, and each partner needs to stay in touch and follow an action plan that defines goals and outlines expectations for the partnership.

Signature

Please return completed form to Colleen Gorniak at cgorniak@aiane.org