

**Division 18 Diversity Task Force  
Mentoring Program**

Thank you for your interest in the Division 18 Diversity Task Force Mentoring Program. Please complete this fact sheet and return it to the address listed below. By responding to the following questions, you will help promote the best match possible between mentors and students.

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Email: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I am interested in being a:  Mentor  Mentee

Section of Division 18:

- |   |   |
|---|---|
| <input type="checkbox"/> Veterans Affairs         | <input type="checkbox"/> Psychologist in Indian Country |
| <input type="checkbox"/> Criminal Justice         | <input type="checkbox"/> Community and State Hospital   |
| <input type="checkbox"/> Police and Public Safety |   |

Employer/Type of work: \_\_\_\_\_

Professional areas of expertise/interest:  
\_\_\_\_\_  
\_\_\_\_\_

Interests and hobbies:  
\_\_\_\_\_  
\_\_\_\_\_

Ethnic Group:

- |   |   |
|---|---|
| <input type="checkbox"/> African American | <input type="checkbox"/> Asian                |
| <input type="checkbox"/> Hispanic         | <input type="checkbox"/> Native American      |
| <input type="checkbox"/> Caucasian        | <input type="checkbox"/> Other, Please State: |

**For Students:**

My future career goals are: \_\_\_\_\_

Areas I would like my mentor to address are: \_\_\_\_\_

**For Mentors:**

How many students would you be willing to mentor? \_\_\_\_\_

*Please return completed form to:*

Abigail.Bernett@Marquette.edu	or	Abby Bennett Marquette University – College of Education Walter Schroeder Complex, 150 561 N 15 <sup>th</sup> St Milwaukee, WI 53233
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