

Mentor

Mentor/Mentee Program Application

Name (Last, First, MI) _____ Date _____

Local Address _____

Local Phone _____ School E-mail Address _____

Major _____ Grade Level _____ Gender: Male ___ Female ___

Why do you feel that you would make a good Mentor?

What do you hope to gain from being a Mentor?

What organizations/ extra-curricular activities are you involved in?

Please submit your class schedule along with any known commitments for next year.

If you have any questions, please e-mail the University Honors Program at honors@uww.edu

Return completed application to: honors@uww.edu

OR

University Honors Program – Andersen 2111

UW-Whitewater

800 W. Main Street

Whitewater, WI 53190

For office use only:

Date Received _____ Initials _____ Approved _____ Denied _____

Student(s) Paired With _____ Notify Student _____ Initials _____