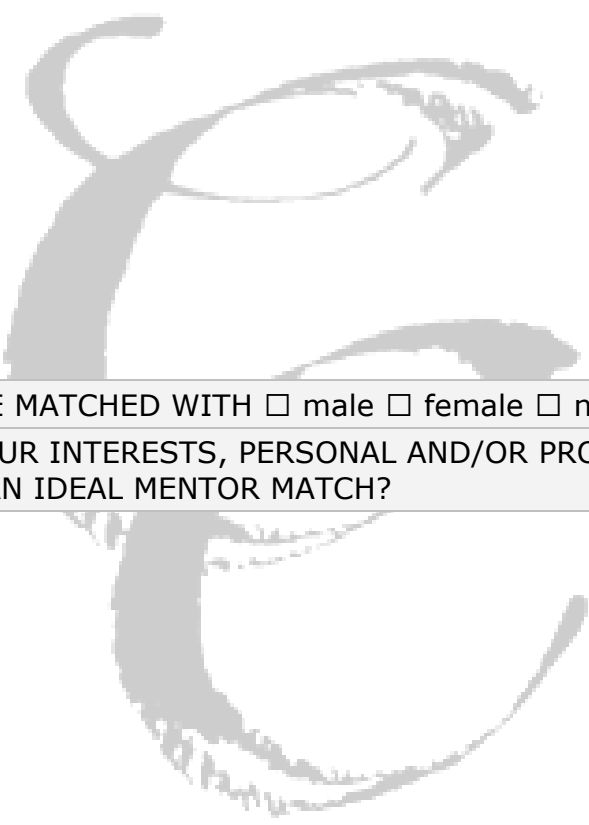
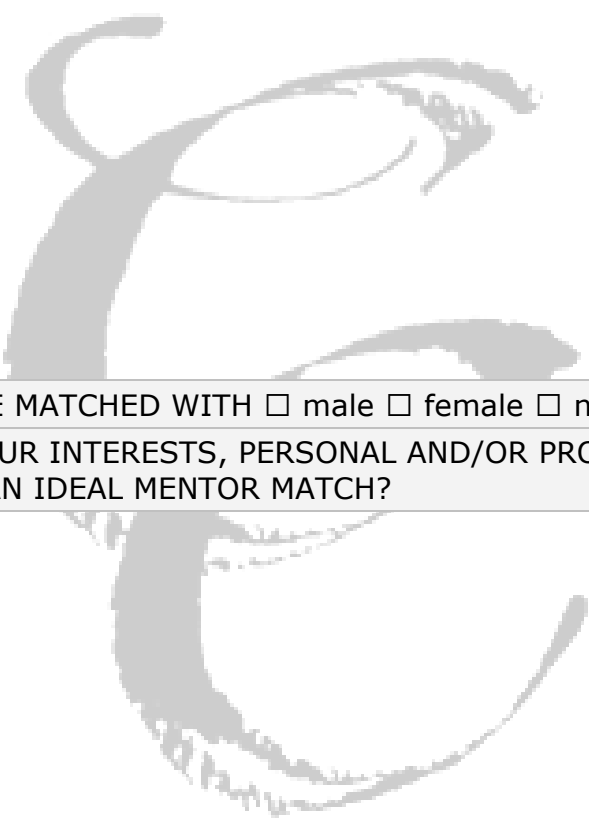


NEW EMPLOYEE APPLICATION FOR MENTOR PROGRAM

Employee Name: Date of Hire:	Department:
Supervisor: Title:	
WHY WOULD YOU LIKE TO PARTICIPATE IN THE MENTOR PROGRAM?	
	
WOULD YOU LIKE TO BE MATCHED WITH <input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> no preference	
WHAT ARE SOME OF YOUR INTERESTS, PERSONAL AND/OR PROFESSIONAL, THAT WILL CONTRIBUTE TO AN IDEAL MENTOR MATCH?	
	
WHAT TYPES OF ACTIVITIES WOULD YOU BE INTERESTED IN DOING WITH YOUR MENTOR?	
<ul style="list-style-type: none"> • Getting together for breakfast • Getting together for lunch • Attending a lecture, a music or theater performance, or other CC event • Participating in sports • Attending a CC athletic game • Meeting other CC employees • Other 	
EMPLOYEE SIGNATURE	SUPERVISOR SIGNATURE
Name:	Name:
Date:	Date:

UPON COMPLETION, PLEASE SUBMIT THIS FORM TO HUMAN RESOURCES