



**BBSHRM Human Resources Mentoring Program
Mentor Application Form**

Mentor Profile:

Name: _____

Job Title: _____

Organization: _____

Office Phone: _____ Alternate Phone: _____

E-mail: _____

I prefer to be contacted by: Phone ___ E-mail ___ Morning ___ Afternoon ___ Evening ___

Company Address: _____

Type of Industry (Current and Past): _____

Current and Past HR Experience:

Brief description of experience and major job responsibilities: _____

Areas of HR Expertise and Interest:

- HR Generalist
- Compensation, Benefits, and Total Rewards
- HR Information Systems
- Employee & Labor Relations
- Training & Organization Development
- Staffing, Recruitment, and Talent Management
- HR Consulting
- HR Research
- Workplace Diversity
- Workplace Health & Safety
- Management/ Team Leadership
- Other, please specify _____

Education:

Professional certification/memberships/degree held: _____

Why do you want to participate in the Mentoring program? _____

How did you learn about the Big Bend SHRM Mentoring program? _____

Signature

Date

Please email a signed copy of this agreement to the BBSHRM Mentoring Chairperson at diversity@bigbendshrm.org and keep a copy for your records.