



# N4A MENTOR PROGRAM



## MENTEE FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ N4A Region: \_\_\_\_\_ Yr. Joined N4A: \_\_\_\_\_

Institution: \_\_\_\_\_ Size of institution: \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Main Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**To assist us in matching you with a mentor, please tell us a little about yourself:**

Gender: Male Female Ethnicity: \_\_\_\_\_

NCAA/NAIA Division: I II III Junior College NAIA

How many years have you been in academic athletic support? \_\_\_\_\_

Special Interests: \_\_\_\_\_

\_\_\_\_\_

**Please tell us a little about the individual you would like to be matched with:**

Specific Person: \_\_\_\_\_

**OR**

Gender: Male Female No Preference

Ethnicity: \_\_\_\_\_ No Preference

NCAA/NAIA Division: I II III Junior College NAIA No Preference

Would you be willing to be mentored by a professional from outside your region? Yes No

**Please send completed form to:**

Martina Martin-N4A Mentor Program Coordinator

Athletic Academic Services

Student Activities Center-E202

University of Louisville

Louisville, KY 40292

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502.852.7924 (fax)

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