

Date Applied: _____

SSC Mentor Request Form

Please fill out this form to participate as a mentee in the SSC Alumni/Mentor Network mentoring program. Please submit the completed form or any questions to William Radtke at WRadtke@ssc.edu.

Name: _____ SSC Student ID number (If applicable): _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone #: _____

Alternate Phone #: _____ SSC Email: _____

Why do you want an SSC Mentor?

What is your major or career interests?

What are some of your hobbies?

Were you a member of any clubs, organizations, or after school activities in high school?

Describe your personality.

How did you find out about the SSC Alumni/Mentor Network Mentoring Program?

What are the qualities you are looking for in a mentor?

Weekly availability:

- Mondays: _____
- Tuesdays: _____
- Wednesdays: _____
- Thursdays: _____
- Fridays: _____