



QLAW
The LGBT Bar Association
of Washington

**Mentorship Program for Law Students and New Attorneys
MENTEE PARTICIPANT FORM**

Name _____

Phone (home) _____ Phone (work) _____

Mailing address _____

Email address _____ Gender _____

Law School/Year of (Expected) Graduation _____

Undergraduate School _____

Practice area or area of interest, volunteer work, student group participation, etc.: _____

Hobbies/Interests _____

What are your expectations of the mentoring relationship (e.g., networking, career development, etc.)?

Do you have any special requests as to choice of mentor (e.g., being paired with a mentor of a specific age, gender, practice area, activist interest, etc.)? If so, please describe: _____

Is there anything else you'd like to tell us about your involvement in the program (e.g., your goals in participating, suggestions for the program, etc.)? _____

Check the box that that best applies to you?

- I'm super serious about my future and only want to meet an attorney in my prospective field (we won't judge you!);
- I'm doing this to make social connections in the community and to have fun;
- I like to mix business with pleasure, I'm hoping to make social connections that will lead to professional connections!

In terms of contacting your mentor, check the box that best applies to you?

- I'm a pretty shy person and will be deterred if my mentor doesn't respond to my first or second email;
- I'm comfortable making repeated attempts to reach my mentor because I know they're busy.

I authorize release of this information to my mentor: YES NO

Signature _____ Date _____

Please return your completed form to Josh Treybig by e-mail to treybig@gmail.com.