



NORTH ORANGE COUNTY
COMMUNITY COLLEGE DISTRICT

Mentorship Program

Mentor Application

Name: _____

Current Position: _____ Department: _____

Office Phone: _____ Email: _____

Instructions:

1. *Submit the completed application to the Professional Development Office via email to profdev@noccdd.edu by May 13th, 2022. Please write "Mentor Application for <your name>" in the subject line.*
2. Why do you want to be a mentor?
3. What experiences, if any, have you had with mentoring?
4. Describe your strongest competencies (i.e knowledge, skills, and abilities)
5. What do you think a mentee can learn from you?
6. What are your interests and hobbies outside of work?
7. What do you hope to achieve from the mentoring program?

Please attach your resume.