



American Planning Association  
**California Chapter  
 Northern**

*Making Great Communities Happen*

**APA California Northern  
 MENTORSHIP PROGRAM  
 2013-2014 MENTOR APPLICATION**

Thank you for being willing to mentor planners and planning students. This Mentorship Program will run from October 2013 to June 2014. The following information will be used to help match you to mentees. Please attach your resume to this application. Participant applications are due to Thalia Leng, [thaliah@gmail.com](mailto:thaliah@gmail.com), by Monday, September 30, 2013. Visit the Section’s website ([www.norcalapa.org](http://www.norcalapa.org)) for more details on the Mentorship Program.

Name: \_\_\_\_\_ APA Membership Number: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Were you involved as a mentor in the previous Mentorship Program?  Yes  No  
 If yes, would you like to be matched up with your previous mentees?  Yes  No  
 What are you looking for in a mentee?

Do you have any geographic/time constraints?  Yes  No  
 If yes, please describe:  
 How far are you willing to travel to meet with a mentee? \_\_\_\_\_ miles  
 How do you rank the following (1 as most desired and 3 as least desired):  
 \_\_\_\_\_ proximity to mentees    \_\_\_\_\_ align schedule with mentees    \_\_\_\_\_ similar areas of expertise

**EMPLOYMENT**

Current Employer and Position:  
 Length of Time in this Position:

Previous Employer and Position:  
 Length of Time in this Position:

Previous Employer and Position:  
 Length of Time in this Position:

**EDUCATION (POST HIGH SCHOOL)**

School Attended:  
 Date Graduated: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

School Attended:  
 Date Graduated: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

## APA California Northern Mentorship Program | Mentor Application – Page 2

Please describe your career and planning experience:

What kind of skills or knowledge can you offer in a mentoring relationship?

If selected to be a mentor, what are your goals for yourself and for your mentee?

Check all skills and knowledge areas in which you would be able to provide mentoring: *(check all that apply)*

- |   |  |
|---|--|
| <input type="checkbox"/> Administrative             | <input type="checkbox"/> Long-term Planning          |
| <input type="checkbox"/> Business Development       | <input type="checkbox"/> Permitting                  |
| <input type="checkbox"/> Climate Change Planning    | <input type="checkbox"/> Planning for the Disabled   |
| <input type="checkbox"/> Communication              | <input type="checkbox"/> Planning Law                |
| <input type="checkbox"/> Community Development      | <input type="checkbox"/> Private Practice            |
| <input type="checkbox"/> Computers and GIS          | <input type="checkbox"/> Project Management          |
| <input type="checkbox"/> Contracting                | <input type="checkbox"/> Public Participation        |
| <input type="checkbox"/> Economic Development       | <input type="checkbox"/> Regional Planning           |
| <input type="checkbox"/> Energy Planning            | <input type="checkbox"/> Small Town & Rural Planning |
| <input type="checkbox"/> Environmental Planning     | <input type="checkbox"/> Strategic Planning          |
| <input type="checkbox"/> Federal Planning           | <input type="checkbox"/> Sustainability              |
| <input type="checkbox"/> Grants                     | <input type="checkbox"/> Time Management             |
| <input type="checkbox"/> Historic Preservation      | <input type="checkbox"/> Transportation Planning     |
| <input type="checkbox"/> Housing                    | <input type="checkbox"/> Urban Design                |
| <input type="checkbox"/> Local/Municipal Government | <input type="checkbox"/> Waste Management            |

Other skills or knowledge area: *(please specify)*