

AFP Speed Mentoring

Please submit to [Name/Email] by [Date]
Matches will be made based on survey responses by [Date]

Name: _____ Email: _____

Organization/Position/Title: _____

I would like to apply to be a mentor

Please check the area(s) of expertise from the following list that you would be willing to discuss with your mentee. Areas can be related to a current position or knowledge/experience gained through previous positions.

<input type="checkbox"/> Corporate & Foundation Relations	<input type="checkbox"/> Planned Giving
<input type="checkbox"/> Direct Marketing/Annual Giving	<input type="checkbox"/> Prospect Management/ Research
<input type="checkbox"/> Finance/ Gift Processing	<input type="checkbox"/> Career Development
<input type="checkbox"/> Major Gifts/ Frontline Fundraising	

I would like to apply to be a mentee

Please check areas of expertise that you would be willing to discuss with your mentee. Areas can be related to a current position or knowledge/experience gained through previous positions.

<input type="checkbox"/> Corporate & Foundation Relations	<input type="checkbox"/> Planned Giving
<input type="checkbox"/> Direct Marketing/Annual Giving	<input type="checkbox"/> Prospect Management/ Research
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