

# Mentor Form

Please fill out the form below so that we can pair you with the appropriate mentee(s) so that you can help them in their professional development.

## **Contact Information:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_  
Current Job Title \_\_\_\_\_  
LEA Name and Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PASBO Chapter Association \_\_\_\_\_  
Area of Mentor Expertise \_\_\_\_\_  
Years of Experience in School Business \_\_\_\_\_

As a Mentor I can provide:

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I would like to be matched with a mentee(s) who are looking for professional development in the areas:

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As a mentor I am committing to:

- Communicating and meeting with my mentee on a regular basis.
- Checking emails regularly and responding promptly and professionally to email/phone calls.
- Showing appreciation and interest to my mentee
- Notifying Bobbi Billman, PASBO's Director of Member Development, if I am having concerns about my mentee relationship.

Signed: \_\_\_\_\_ Date \_\_\_\_\_

**Once completed, send to Frederick Wilburn, Director of Member Development, at**  
[fwilburn@pasbo.org](mailto:fwilburn@pasbo.org)