

Mentee Application Form

IFMA SV Mentoring Program

Name: _____	Company: _____
Title: _____	Company Address: _____ _____
Business Phone: _____	Cell Phone: _____
Email: _____	LinkedIn Profile: _____

1. Are You an IFMA SV Member? Yes No

2. Do you regularly attend: IFMA Chapter Meetings Roundtables Deep Dives Breakfasts
 Special Events

3. Indicate the number of years you've been involved in each of the following areas of specialization and check those you are interested in learning more about.

Area of Responsibility	# Years Experience	Interested In
Budgeting / Finance		
Building Engineering / HVAC		
Business Development / Sales		
Construction / Project Management		
Disaster Recovery / Continuity		
Employee Programs (Fitness, Wellness, Childcare, etc.)		
Environmental Health & Safety (ES&H)		
Event Management		
Fleet Management		
Food Service Management		
Help Desk Management		
IT / Data Center / Critical Systems Management		
Janitorial Management		
Maintenance / Repairs		
Move Management		
Real Estate / Asset & Property Management / Leasing		
Reception / Administration / Records Management		
Security		
Site Maintenance / Landscaping / Parking		
Spaceplanning / Interior Design		
Sustainability / Energy Management / Green Initiatives		
Transportation Demand Management		
Vendor / Contracts Management		
Waste Management / Recycling		
Other:		
Other		

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4. Have you ever had a mentor? In what capacity?

5. What are your top four benefits you hope to get from participating in the mentor program?

- To obtain general knowledge of the facilities management industry (define roles, responsibilities & performance criteria)
- Increase my aptitude and skills in job performance to the next level through and understanding of best practices
- Increase my credibility within or outside department / firm
- Obtain advice about how to communicate and/or protocols with clients, colleagues and superiors
- Obtain coaching/training/education resources – articles, books, access to additional mentors, etc.
- Obtain insights into career goals and objectives
- Obtain insights into challenges and conflicts at work
- Obtain coaching to develop leadership skills
- Other (specify):

6. Check any of the following that are important to you in a mentor. Please prioritize your choices on right.

<input type="checkbox"/> Interest in a particular discipline/areas of expertise (please specify)
<input type="checkbox"/> Has an FM credential
<input type="checkbox"/> Positions previously held in industry (please specify)
<input type="checkbox"/> Type of company mentor works for (please specify)
<input type="checkbox"/> Mentor works in proximity of my company/home (if home indicate general location)
<input type="checkbox"/> I would like a mentor of the same gender
<input type="checkbox"/> Other (please specify)
<input type="checkbox"/> Other (please specify)

7. Please attach a **copy of your resume** which lists your educational background, all degrees/ certifications and work experience.

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8. **This is extremely important:** please describe the nature of mentoring you envision receiving and what you hope to get out of the program. Expand on Question # 5 above, be specific – do not generalize. What are your success criteria? If you already have identified any goals, please list them. What you include here about yourself will help us to better match you to a mentor (attach separate page if necessary).

Please email the completed Mentee Application Form to the IFMA SV chapter administrator, admin@ifmasv.org and it will be passed on to Mentor Committee Coordinator. Put MENTEE APPLICATION in the subject line.