



MENTOR/MENTEE PROGRAM APPLICATION

(please type or print)

Date _____

Name _____ Bar # _____

Firm/Company Name (if appropriate) _____

Address _____

Telephone _____ E-mail _____

Law school _____ Date of Graduation _____

Date of First Admission in Any Jurisdiction _____ Jurisdictions in Which Admitted _____

I am applying to become a: **Mentor to a lawyer** **Mentor to a third-year law student** **Mentee**

If applying to become a mentor, please identify your interest (check all that apply): Telephone Mentor to a lawyer

One-to-One Mentor to a lawyer One-to-One Mentor to a student Mentor to a law student or lawyer with a disability

If requesting a mentor, indicate if you would like a mentor who:

Has a disability Is knowledgeable about the issues faced by law students or lawyers with a disability

What do you hope to gain from a mentor/mentee experience? _____

1. If requesting a mentor, please rank the following characteristics of a potential mentor that are important to you.

- | | |
|---|---|
| <input type="checkbox"/> Type of practice | <input type="checkbox"/> Areas of law |
| <input type="checkbox"/> Location of mentor | <input type="checkbox"/> Length of time practicing law |
| <input type="checkbox"/> Type of work performed | <input type="checkbox"/> Knowledge of issues faced by a law student or lawyer with a disability |

2. I would prefer a mentor or mentee who (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Is located in the Phoenix Area | <input type="checkbox"/> Is a graduate of, or law student at, Arizona State University College of Law |
| <input type="checkbox"/> Is located in the Tucson Area | <input type="checkbox"/> Is a graduate of, or law student at, the University of Arizona College of Law |
| <input type="checkbox"/> Has a disability | |
| <input type="checkbox"/> No preference | |

3. If applying to become a mentor, please identify the type of practice in which you work; if requesting a mentor, please identify the type of practice with which you would like your mentor to be affiliated.

- | | |
|---|---|
| <input type="checkbox"/> Solo practitioner | <input type="checkbox"/> Corporate counsel |
| <input type="checkbox"/> Member of a small firm (2-20 attorneys) | <input type="checkbox"/> Government lawyer (circle one: local county state federal) |
| <input type="checkbox"/> Member of a medium-size firm (20-60 attorneys) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Member of a large firm (60+ attorneys) | <input type="checkbox"/> No preference (mentee applicants only) |

4. My practice involves, or I am most interested in (pick no more than three; number them 1-3 with #1 being most important):

- | | |
|---|---|
| <input type="checkbox"/> Trial work | <input type="checkbox"/> Administrative skills |
| <input type="checkbox"/> Practice in state and federal courts | <input type="checkbox"/> Appearances before regulatory boards |
| <input type="checkbox"/> Extensive research | <input type="checkbox"/> Social obligations |
| <input type="checkbox"/> Substantial travel | <input type="checkbox"/> Other: _____ |

5. My practice primarily involves, or I am most interested in, the following areas of law: _____

The Guidelines for Mentors can be found at myazbar.org (Click on "Committees" in the dropdown menu under the "Sections & Committees" heading, and then select "Mentor" Committee).

I certify that I have read and am familiar with guidelines and requirements of the Mentor Program and that I will abide by the guidelines currently in force and as they may be from time to time amended by the Mentor Committee. If I am a Mentor applicant, I certify that I have been in practice for at least five years (three years if applying to be a mentor to a third-year law student), I am a member in good standing with the State Bar of Arizona, and I have no disciplinary sanctions during the past five years.

Signature of applicant

PLEASE RETURN TO: State Bar of Arizona
Mentor Committee
4201 N. 24th St., Ste 200
Phoenix, AZ 85016-6288
tracy_ward@staff.azbar.org

Date