NIU COLLEGE OF LAW
FIRST-YEAR MENTORING PROGRAM
MENTOR APPLICATION

NAME: ___________________________________________________

BUSINESS/FIRM NAME AND ADDRESS:

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

BUSINESS PHONE: _____________________________________________

BUSINESS E-MAIL: _____________________________________________

PRACTICE AREAS: _____________________________________________

_________________________________________________________________

BAR/GROUP MEMBERSHIPS: ________________________________

_________________________________________________________________

IF POSSIBLE, WE MAY BE ABLE TO MATCH YOU WITH A STUDENT
WHO HAS INDICATED A SPECIAL INTEREST IN WORKING WITH A
MENTOR WHO HAS IDENTIFIED HIM/HERSELF AS A MEMBER OF A
SPECIAL GROUP (I.E. SECOND CAREER STUDENTS; MARRIED
STUDENTS; STUDENTS WITH CHILDREN; STUDENTS OF COLOR;
LESBIAN, GAY, BISEXUAL, TRANSGENDER [LGBT]; WOMEN; ETC.).

IF YOU ARE INTERESTED IN SUCH A MATCH, PLEASE TELL US
WHICH GROUP(S): ______________________________________________

PLEASE RETURN THIS FORM TO:

GREG C. ANDERSON - CAREER OPPORTUNITIES & DEVELOPMENT
NIU COLLEGE OF LAW

FAX: (815) 753-4501 OR E-MAIL: GANDERSON@NIU.EDU

THANK YOU FOR YOUR TIME AND COMMITMENT TO OUR
STUDENTS!

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