



Paralegal Association of Central Ohio

Mentee Request Form

Name _____

Home Address _____

Home Phone _____

Cell Phone _____

E-Mail _____

Place of Employment _____

Business Address _____

Business Phone _____

Education _____

Anticipated Graduation _____

Certifications _____

Memberships _____

I am currently a(n):

- _____ paralegal student
- _____ junior paralegal
- _____ experienced paralegal interested in changing fields

I am requesting a mentor for the following purpose(s):

- _____ Practice area related paralegal duties
- _____ Career objectives
- _____ Education goals
- _____ Current information on the paralegal profession, including certifications
- _____ Résumé review and tips for interviewing for a paralegal position
- _____ Other: _____

Areas of Law: Area(s) of Work or Area(s) of Interest _____

Need mentoring with: (career development, resume, job resources, certifications, other)

When and how are you available:

Phone calls (morning) _____ (afternoon) _____ (evenings) _____

Meetings: (morning) _____ (afternoon) _____ (evenings) _____

Breakfast ____ Lunch ____ Dinner ____

Additional comments: _____

You will be contacted within two (2) weeks of matching by a Paralegal Mentor. Please be prepared to meet with your Paralegal Mentor at least once a month. If at any time you are not able to commit to the Mentoring Program, please let me know immediately.

We look forward to helping you develop your career! Please do not hesitate to contact me with any questions.

Thank you in advance for your interest and enthusiasm!

Please complete this form and return it, together with a copy of your resume, to the Mentoring Program Chairperson at mentor@pacoparalegals.org