



2017 | AFP San Diego Mentorship Program

Please complete this Application to become a MENTEE

Name: _____ Title: _____

Organization: _____

Address: _____

Telephone: _____ Fax: _____ E-mail: _____

1. How many years have you worked in the non-profit sector? _____

2. How many people are in the development department where you work?

Small (<3)

Medium (3-10)

Large (10+)

3. Are you an AFP Member? Yes No (circle one)

If you are an AFPSD member, the Mentorship Program is a free benefit.

If you are not an AFPSD Member, there is a \$40 fee for the four-month Mentorship Program.

4. Please indicate the areas for which you are seeking guidance:

Annual Giving

Board Governance

Board Training

Capital Campaigns

Career Development

Communications

(Case Development)

Corporate/Foundation Relations

Direct Mail

Donor Development

Ethics

Grant/Proposal Writing

Major Gifts-Individuals

Marketing

Planned Giving

Prospect Research

Public Relations

Special Events

Sponsorships

Stewardship (Donor Recognition)

Strategic Planning

Volunteer Management

Other: _____

I am aware that the time commitment for the Mentorship Program is four months. I understand that some of the information that will be shared by my mentor about his/her organization can be confidential in nature. By signing this form I consent that any information shared will remain confidential.

Signature: _____ Date: _____

Email, Fax or Mail Application to:

Georgia Ringler, AFP SD Manager
Mentorship Program
P.O. Box 882088 San
Diego, CA 92168

E-mail: georgia.ringler@afpsd.org

Fax: 888-423-7237

For Administrative Use Only:

Mentor: _____

Date Assigned: _____

Date Accepted: _____

Date Completed: _____

Survey Completed: _____

To pay by credit card call: 888-323-7237

Make checks payable to: AFP San Diego Chapter
Re: Mentorship Program