Mentorship Program





Name:		
Agency:	Current Position:	
Agency Address:		
Phone #:	Email Address:	
This form is for information members.	ational purposes only and is used to provi	de the best match for our
1. Please describe your e	xperience in Public Procurement, length of tin	ne, and your experitise.
•	e board for any public procurement associatio? If so, which one(s) and describe what your re	• • •
3. How far are you willing	g to travel to meet with your mentee?	
Signature	Date	_