



Mentor Application- Non-Construction

Name: _____ Title: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

Interested in mentoring: Start—up (0-2 yrs) Emerging (>2 to 6 yrs) Existing (>7 yrs)

Interested in: Mentoring Teaming/Strategic Alliance

Areas of Interest in Mentoring:

- | | |
|--|---|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Management |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Payroll |
| <input type="checkbox"/> Staffing/Hiring/Human Resources | <input type="checkbox"/> Estimating |
| <input type="checkbox"/> Purchasing | <input type="checkbox"/> Financial Management |
| <input type="checkbox"/> Technology | <input type="checkbox"/> Business Planning |
| <input type="checkbox"/> Plan Reading/Bidding | <input type="checkbox"/> Bonding/Insurance |
| <input type="checkbox"/> Construction Trades | <input type="checkbox"/> Other area not identified above: _____ |

I agree to commit to the program for a period of time, as mutually agreed upon between the Small Business Procurement Program, the Mentee and my company as Mentor, in the provision of mentoring assistance. I agree to hold harmless, the City of Gainesville, any of its employees, officers, agents, representatives or affiliates, with regard to this mentoring initiative.

Signed: _____ Date: _____

Printed Name: _____ Title: _____