# NZOHS Mentor/Mentee Application Form

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| **Applying as:** | **Mentor/Mentee** (circle one) |
| **Name:** |  |
| **Membership Level and Number:** |  |
| **Email Address:** |  |
| **Phone No:** |  |
| **Academic Qualifications:** |  |
| **Company Name and Position:** |  |
| **Working Experience (100-200 words)** | |
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| **What do you want to gain from participation in the program?** | |
|  | |
| **Signature:** |  |
| **Date:** |  |