

PLEASE RETURN IN ENCLOSED POSTAGE PAID ENVELOPE

APA Mentor Application

Mr. Ms. Mrs. Miss Dr. Rev.

Date _____

First _____ Middle _____ Last Name _____

Company Name _____ Title/Occupation _____

Work Address _____ Home Address _____

Work Phone () _____ Home Phone () _____

Fax Number () _____ E-mail _____

I prefer to be reached by *telephone* at: ? Home ? Work I prefer my *mail* be sent to: ? Home ? Work

Ethnicity: _____ Languages Spoken: _____

If USC Alumnus, Year(s) Graduated? _____ Degree(s) _____ Major(s)/Field(s) _____

Other Institutions: Name of Institution _____

Year(s) Graduated? _____ Degree(s) _____ Major(s)/Field(s) _____

Yes, I would like to mentor a USC Asian Pacific American student.

Would you like to serve on the event planning committee? Yes No

Have you participated in the APASG Mentor Program before? Yes No If Yes, which years? _____

Please describe the nature of your current work, company, and/or business. (*Please send a bio or resume along with this application*):

Please describe special interests or hobbies:

Thank you for your interest in the Asian Pacific American Support Group Career Mentoring program.

Signature _____ Date _____

Mentor agrees to meet in person with student once per month. As soon as we find a suitable student partner, you'll receive the student profile and they will be forwarded your information.

APASG Membership Application

(optional)

Date: _____

YES! I wish to join as an APASG member in the following category:

Student \$10 Individual Sponsor \$150

Regular \$50 Corporate Sponsor \$500

Faculty/Staff \$50 Cardinal Patron \$1,000

Family \$100 Gold Patron \$2,500

THANK YOU for your enclosed tax deductible APASG membership contribution of \$ _____

Made payable via check or money order to USC-APASG, Check number _____, or

Charged to the following credit card: Visa MasterCard Discover

Credit Card No. _____ Expiration Date: _____

Signature: _____ Print Name: _____