## JUNIOR FACULTY MENTORING PROGRAM Mentee Profile Form

Name:	Title:
Telephone Number:	Campus:
Email Address:	Years at UVI:
Department:	School/College:

Answers to the questions below will help us pair mentors and mentees.

Please describe in a few sentences your research interests.

Please describe in a few sentences the kinds of teaching you do or expect to do (i.e., lectures, seminars, laboratory teaching, graduate advising, etc.)

Each mentor/protégé will agree on a plan for the mentoring partnership. Please state 3 areas where you feel a mentor could help you:

- 1.
- 2.
- <u>2</u>. 3.

Please state any preferences you might have regarding your potential mentor (i.e., gender, race, clinician vs. basic scientist, emeritus vs. current faculty, etc).

Do you desire a mentor inside or outside your department?

If you have already chosen a mentor, please provide that person's name\* and college/school/department below:

Please return this form by August 30<sup>th</sup> to Dr. Kimarie Engerman, Office of the Provost, or via email to: <u>kengerm@uvi.edu</u>.

\*We will need to receive a completed application from him/her also.