



## Occupational Hygiene Association of Ontario (OHAO) Mentoring Program

**PLEASE NOTE: YOU MUST BE AN OHAO MEMBER TO PARTICIPATE IN THE MENTOR PROGRAM AS EITHER MENTEE OR MENTOR.** The membership application is available on the OHAO website: [www.ohao.org](http://www.ohao.org)

### Mentor/Mentee Information Profile

The following application will be used to match potential mentors with mentee candidates. This information will be reviewed by the selection committee and the mentor/mentee. Do not disclose information that you consider confidential.

Application for: Mentor \_\_\_\_\_ Mentee \_\_\_\_\_ (check one only)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Employer or School: \_\_\_\_\_

Professional Experience, Specialty or Interest: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal Interests: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a preference for a mentor or mentee? If so, please indicate the person's name.  
\_\_\_\_\_

Do you have personal goals you would like to achieve through the mentoring program?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for your interest in the OHAO Mentorship Program.  
Please e-mail the completed form to [office@ohao.org](mailto:office@ohao.org).