

## MENTEE INTEREST

Full Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_\_

School E-mail \_\_\_\_\_ Personal E-mail \_\_\_\_\_

Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

Major/Minor \_\_\_\_\_ # semesters in DDP \_\_\_\_\_

Career Interests/Professional Goals \_\_\_\_\_

**Community college attended/attending:**

Joliet Junior College    Kankakee Community College    Moraine Valley Community College

Prairie State College    South Suburban College    Triton College

**Currently enrolled at GSU:**  Yes    No

**If not, anticipated enrollment at GSU:** Term  Fall    Spring    Summer   Year \_\_\_\_\_

**What are your interests, hobbies, extracurricular activities (jobs, clubs, committees, internships, volunteerism, etc.)?**

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**Why do you want to be paired with a peer mentor? How do you think you will benefit?**

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**Questions?** Contact DDP Coordinator of Peer Mentoring, Roshaunda Ross, at [rross3@govst.edu](mailto:rross3@govst.edu) or **708.235.7539**.

Submit the completed form to the address below or email it to [rross3@govst.edu](mailto:rross3@govst.edu), or fax to **708.235.7455**.

**Governors State University**

Office of Admission - DDP

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