



School of  
Leadership Studies

**Spokane Neighborhood Leadership Academy**  
*Mentor Application Form*

First Name:

Last Name:

Neighborhood:

Email Address:

Phone Number:

Age:

Gender:

Ethnicity:

Please tell the selection committee about yourself. What would you like us to know? (200 words or less)

How long have you been a resident of your neighborhood and how are you currently involved in it? (200 words or less)

What previous mentorship experience do you have, or why do you believe you would be a good mentor? (200 words or less)

Please type your initials in the spaces below to acknowledge the following:

\_\_\_ If selected, I commit to host virtual Mentor sessions as scheduled (minimum of 4)

\_\_\_ If selected, I commit to maintaining communication and connection with my cohort through the end of 2024.

\_\_\_ I confirm that the information provided is true and correct to the best of my knowledge.

### References

Please provide the contacts of two people who would be willing to serve as character references for you, if requested.

#### Reference #1

Name:

Phone:

Email:

How do you know this person?:

#### Reference #2

Name:

Phone:

Email:

How do you know this person?:

**Please return form via email to [donahuec@gonzaga.edu](mailto:donahuec@gonzaga.edu)**