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**Early-Career Professional Development Mentorship Program** **Application Form**

**For Mentors**

**Personal Information**

Name: Click or tap here to enter text.

Title/Position: Click or tap here to enter text.

Institution/Organization: Click or tap here to enter text.

Email: Click or tap here to enter text.

Phone: Click or tap here to enter text.

**Membership Information**

Are you a current member of ACCI [ ] Yes [ ] No

If no, are you willing to become a member before the start of the program? [ ] Yes [ ] No

**Academic/Professional Background**

Terminal Degree(s): Click or tap here to enter text.

Field(s) of study: Click or tap here to enter text.

Year of completion: Click or tap here to enter text.

Institution:

**Research/Professional interests** (max 150 words):

Click or tap here to enter text.

**What unique skills or knowledge do you bring to the mentorship program that would benefit your mentee**? (max 150 words)

Click or tap here to enter text.

**How do you anticipate benefiting from participating in the mentorship program?** (max 150 words)

Click or tap here to enter text.

[ ]  I understand that (if selected) I am committing to participate in all program activities.

Please note that if you are unable to commit to all program activities, you may not be eligible for the program. However, we understand that extenuating circumstances may arise and will do our best to work with you to accommodate your needs.

**Supporting Documents**

* Please provide the following supporting documents:
* CV

Please combine your application form and your CV into a **single PDF file** and email it to Dr. Yunhee Chang at chang@olemiss.edu with "ACCI mentorship program MENTOR application" in the subject line.

Thank you for your interest in serving as a mentor for the Early-Career Professional Development Mentorship Program. We appreciate your dedication to enhancing consumer and family economic well-being.