



MHOA Mentorship Program Mentee Application 2024-2025

CONTACT INFORMATION

Name (Last, First):

Date:

Job Title:

Organization:

Address (Street, City, State, Zip):

Email:

Phone:

PLEASE UPLOAD YOUR RESUME

PROGRAM QUESTIONS

Which best describes your public health career? (*Check one*)

- Student (Entering final year of program)
- Early career (1-2 years of experience)
- Mid-career (5+ years of experience)
- Established career (10+ years of experience)

GOALS

For mentees: What are your goals for participating in the mentorship program?

(Check all that apply)

- Assistance with setting and achieving career goals
- Guidance on career development and advancement opportunities
- Advice or assistance in acquiring licenses and certificates (such as Soil Evaluator, Title 5 System Inspector, Registered Sanitarian, Certified Professional in Food Safety, Certified Pool Operator, Certified Health Officer, etc.)
 - Specify license(s)/certification(s):
- Opportunities to learn new skills and techniques relevant to the public health field
 - Specify subject area(s):
- Exposure to different areas of local public health
- Access to resources and information on best practices
 - Specify subject area(s):
- Job shadowing for on-site experience
- Advice on work-life balance and managing job-related stress
- Assistance with navigating workplace culture and dynamics
- Support and advice on professional networking and relationship-building
- Feedback and advice on work performance
- Encouragement and motivation to pursue personal and professional growth
- Other (specify):

Email completed application to mentorship@mhoa.com