



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

Title: \_\_\_\_\_

SMPS #: \_\_\_\_\_

Years of Membership: \_\_\_\_\_

**Contact Information**

Years of Experience: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Degrees/Education: \_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

Principal/Manager Signature (*Optional*): \_\_\_\_\_

1. In 50 words or less describe your career goals and how you see this program helping you achieving those goals:

2. Check all positions that you have held in the industry during your career.

- |  |  |
|--|--|
| <input type="checkbox"/> Business Development / Sales Representative | <input type="checkbox"/> Corporate Communications      |
| <input type="checkbox"/> Graphic Design                              | <input type="checkbox"/> Marketing Consultant          |
| <input type="checkbox"/> Marketing/Proposal Coordination             | <input type="checkbox"/> Marketing Research            |
| <input type="checkbox"/> Public Relations                            | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Technical/Operations Position               |  |

3. Check all types of organizations in which you have been employed during your career

- |  |   |
|--|---|
| <input type="checkbox"/> A/E/C Industry Consultant             | <input type="checkbox"/> Graphics/Photography/Printing          |
| <input type="checkbox"/> Architecture/Planning/Interior Design | <input type="checkbox"/> Media/Publications                     |
| <input type="checkbox"/> Community Outreach/Nonprofit          | <input type="checkbox"/> Multimedia/Technology                  |
| <input type="checkbox"/> Consultant – Marketing/PR             | <input type="checkbox"/> Program Manager/Owner's Representative |
| <input type="checkbox"/> Construction – General or Speciality  | <input type="checkbox"/> Surveying                              |
| <input type="checkbox"/> Engineering – (please specify): _____ | <input type="checkbox"/> Training/Customer Service              |
| <input type="checkbox"/> Government                            | <input type="checkbox"/> Other (please specify): _____          |



4. Have you ever been a protégé?

- Yes                      If yes, which organization? \_\_\_\_\_
- No

5. Check all of the areas in which you are interested in working with a mentor:

- |  |  |
|--|--|
| <input type="checkbox"/> Basic Industry Knowledge                  | <input type="checkbox"/> Leadership and Facilitation       |
| <input type="checkbox"/> Budgeting/Finance                         | <input type="checkbox"/> Marketing Management/Coordination |
| <input type="checkbox"/> Business Development                      | <input type="checkbox"/> Marketing Research                |
| <input type="checkbox"/> Career Advancement/Decisions              | <input type="checkbox"/> Strategic Planning                |
| <input type="checkbox"/> Communications/Public Relations           | <input type="checkbox"/> Technology                        |
| <input type="checkbox"/> Corporate Culture                         | <input type="checkbox"/> Other(please specify): _____      |
| <input type="checkbox"/> Diversity (gender, ethnicity, age) issues |  |
| <input type="checkbox"/> Graphics/Artistic Direction               |  |

6. What are your career objectives in the next 2-5 years? (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> CPSM (Certified Professional Services Marketer)                | <input type="checkbox"/> Career Change          |
| <input type="checkbox"/> FSMPS (Society of SMPS Fellow)                                 | <input type="checkbox"/> Independent Consulting |
| <input type="checkbox"/> Advance to a higher marketing position (please specify): _____ | <input type="checkbox"/> Other: _____           |
| <input type="checkbox"/> Principal Track (non-marketing)                                |   |

7. Preferred day/time for monthly meetings: \_\_\_\_\_

8. What are the top three benefits you hope to get from participating in a mentoring program?

- |  |   |
|--|---|
| <input type="checkbox"/> Increase my confidence in my job                    | <input type="checkbox"/> To better communicate with clients and colleagues                                    |
| <input type="checkbox"/> Increase my level of skills                         | <input type="checkbox"/> To get guidance, feedback, alternatives to consider, have a sounding board for ideas |
| <input type="checkbox"/> Increase my ability to problem-solve                | <input type="checkbox"/> To get coaching / training/ education / resources                                    |
| <input type="checkbox"/> Increase my ability to set priorities               | <input type="checkbox"/> To get support and encouragement   |
| <input type="checkbox"/> Increase my credibility within my department / firm | <input type="checkbox"/> To feel less isolated  |
| <input type="checkbox"/> Increase my credibility outside my firm             | <input type="checkbox"/> Other: _____   |

9. What are the three most important things to you in finding a mentor?

- Area of marketing expertise
- Experience in a particular discipline (architecture, engineering, etc.)
- Number of years of experience
- Credentials in marketing or A/E/C industry
- Positions previously held in industry
- Experience in the same size firm
- Located in geographical proximity
- Not located in geographical proximity
- Want a mentor who will meet with me personally
- Want a mentor of the same gender
- Other: \_\_\_\_\_