

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: _____