

MPPI MENTORSHIP PROGRAM

STUDENT PROFILE FORM

Name:

Address:

Phone:

Email:

Fax:

Date:

Please select your best point of contact:

Do you want a same sex mentor:

Please select the box or boxes that best describes your area of interest:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

City Planning and Management

Education

Community Planning

Planning Law

Economic Development

Recreation and Tourism

Environmental, Natural Resources

Rural Planning

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
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Heritage and Culture

Social Services

Transportation

Transportation and Infrastructure

Information Technology

Urban Design

Real Estate Development

Other ()

Please select the box that best describes the type of organization for which you may be interested in working for:

<input type="checkbox"/>
<input type="checkbox"/>

Private Consulting / Consulting Firm

Municipal Government

<input type="checkbox"/>
<input type="checkbox"/>

Federal Government

Provincial Government

<input type="checkbox"/>
<input type="checkbox"/>

Not Profit

Other

What are your expectations of this program and your mentor?

Please submit this form to the MPPI Continual Professional Learning (CPL) committee, via the Student Liaison, Brock Feenstra (brock.feenstra@gmail.com)