



Confidence, Creativity, Opportunity: Driving Entrepreneurship Forward ►

Mentor Application

APPLICANT INFORMATION		
Name	DOB	SS#
Address		
E-mail Address		
Home Phone	Cell Phone	

CURRENT BUSINESS OR EMPLOYMENT	
Company Name	
Company Address	
Start Date:	
Type of Business/Organization:	
BUSINESS OR EMPLOYMENT HISTORY #1	BUSINESS OR EMPLOYMENT HISTORY #2
Name of Company 1:	Name of Company 2:
Address	Address
Start Date:	Start Date:
End Date:	End Date:
Type of Business/Organization:	Type of Business/Organization:

REFERENCE NAME	ADDRESS	PHONE	TYPE OF REFERENCE
			<input type="checkbox"/> Personal <input type="checkbox"/> Business
			<input type="checkbox"/> Personal <input type="checkbox"/> Business
			<input type="checkbox"/> Personal <input type="checkbox"/> Business

LEGAL
Have you had criminal charges in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what was the outcome of case;
Are you currently under investigation for any criminal activity? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide details;
Are you or your business involved in any civil case? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide details;

WHY DO YOU WANT TO BE A MENTOR?

WHAT ARE YOUR AREAS OF EXPERTISE?

Please select the areas you feel your are an expert in and can provide training.

<input type="checkbox"/> Marketing	<input type="checkbox"/> Projections	<input type="checkbox"/> Exporting	<input type="checkbox"/> Financial Planning
<input type="checkbox"/> Technology	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Logistics	<input type="checkbox"/> Goal Planning
<input type="checkbox"/> Importing	<input type="checkbox"/> Systems	<input type="checkbox"/> Legal	
<input type="checkbox"/> Sales	<input type="checkbox"/> Business Planning	<input type="checkbox"/> Tourism	
<input type="checkbox"/> Accounting	<input type="checkbox"/> Financial Planning	<input type="checkbox"/> Accounting	

HOW DID YOU HEAR ABOUT THE YBTB?

News Paper TV Presentation Current Mentor Other:

I certified that everything I have stated in this application and on any attachments is correct. YBTB may keep this application whether or not it is approved. By signing below I authorize you to check employment history.

Signature of Applicant

Date