

Return form to:
Morgan Weber, Mentor Director
fdlmentorship@uwc.edu

UW-Fond du Lac Mentorship

STUDENT

**I
N
F
O
R
M
A
T
I
O
N**

SECTION

Student Name: _____ **Address:** _____

Phone Number: _____ **Email Address:** _____

Best time to contact you? _____ **How do you prefer to be contacted by?** _____

Emergency Contact Information:
Name: _____ **Relationship:** _____
Home phone number: _____ **Work phone number:** _____

Do you have any other questions and/ or concerns? If so, please state:

Please sign below to indicate that you have received UW-FDL mentorship rules and regulations and agree to follow them. By signing, you also agree to follow any procedures which, includes, but not limited, to back ground checks and any other rules and regulations required by the community partner of the sub-program. Failure to do so will result in immediate expulsion from this program.

_____ Date _____