



St. Matthew's University



School of Medicine Student Mentee Application & Matching Form

Directions: Please complete the following application and matching questions. Personal contact information is for the Office of Student Services files, to be maintained for recording and verifying purposes, and given to student mentors for initial contact with student mentees.

The questions asked on the matching section are **voluntary** and will help to connect you with a student mentor who shares similar characteristics, backgrounds and interests as you. If you have any questions or concerns, please contact Irene Derksen, Senior Student Advisor, iderksen@smu.ky or 345-814-3155.

A.) Personal Contact Information

Name (First, Last)	Preferred Email	
Home Phone	Cell Phone	Starting Semester (e.g. Fall 2009)

B.) Matching Information (Note: The data in this area is used to match mentees with mentors who share similar background, experiences, and interests. This is optional, but highly recommended).

<div style="background-color: #cccccc; padding: 2px;">1.) Language (s)</div> <p>Which language (s) do you speak fluently?</p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>If you listed more than one, indicate which is your first language?</p>	<div style="background-color: #cccccc; padding: 2px;">2. Place of Origin</div> <p>Where did you grow up (hometown, state/province, country)?</p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>	<div style="background-color: #cccccc; padding: 2px;">3. University/ College</div> <p>Which University/ College current and past, did you attend? (list name and state/province & country)</p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>What is/was your major?</p>
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4.) Marital Status	
<input type="checkbox"/> Divorced	If married, choose one of the following: <input type="checkbox"/> Spouse present with you on island <input type="checkbox"/> Spouse not present
<input type="checkbox"/> Married	
<input type="checkbox"/> Never Married	
<input type="checkbox"/> Widowed	

5.) Family	
Do you have children? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you have children, will they be on the island: <input type="checkbox"/> Yes <input type="checkbox"/> No

6.) Medicine Interest
Please list medical specialties or interest you have and would be interested in pursuing at St. Matthew's University.

7.) Mentee Preference
Do you prefer a male/ female mentor? <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No Preference
Do you have a mentor in mind (list name and they have to be an official student mentor)?

C.) Mentee Criteria & Expectations

Please read over the following criteria and expectations and type your name and date underneath to signify that you understand what is expected of you and agree to fulfill these requirements.

Mentee Criteria

All mentees must meet the following criteria:

- Incoming St. Matthew's University medical student
- Have a positive attitude
- Be interested in establishing a positive relationship with a student mentor

Mentee Expectations

Mentees are required to fulfill the following responsibilities:

- Maintain contact with student mentor at least once per month
- Have at least two face-to-face meeting each semester
- Ask questions of your mentor
- Not lose contact with your mentor

I, _____, have read over the above mentee criteria and expectations and agree to meet these standards and to fulfill the expectations outlined above.

Printed Name

Date

Please send completed form to iderkсен@smu.ky (preferred) or fax to 1-345-945-3130. Thank you.