



INTERNATIONAL  
SPECIAL EVENTS SOCIETY  
MINNEAPOLIS-ST. PAUL CHAPTER

## Volunteer Mentorship Application Form

NAME	DESIGNATION(S) <i>(EXAMPLE: CSEP, CMP)</i>	
COMPANY	WORK PHONE	# OF YEARS IN THE INDUSTRY
E-MAIL ADDRESS	WORK CITY	# OF YEARS WITH ISES
ORGANIZATIONS TO WHICH YOU BELONG		
PLEASE GIVE A BRIEF DESCRIPTION OF YOUR WORK EXPERIENCE AND/OR INVOLVEMNT WITH ASSOCIATIONS		
PLEASE DESCRIBE YOUR AREAS OF EVENTS EXPERTISE (I.E. SALES, CONTRACTS, LOGISTICS, ETC.)		
PLEASE DESCRIBE YOUR PROFESSIONAL STRENGTHS (I.E. TIME MANAGEMENT, TEAM BUILDING, MULTI-TASKING, ETC.)		
PLEASE DESCRIBE SOME OF YOUR KEY PERSONALITY TRAITS (I.E. OUTGOING/RESERVED, FAMILY-ORIENTED, TYPE A, ETC.)		
LIST TWO OR THREE SPECIFIC GOALS YOU WOULD LIKE TO ACHIEVE IN CONJUNCTION WITH THIS MENTOR/MENTEE RELATIONSHIP		

**Please e-mail form to [mentorship@ises-msp.org](mailto:mentorship@ises-msp.org).**  
**Questions? Contact [mentorship@ises-msp.org](mailto:mentorship@ises-msp.org).**