United States Department of Agriculture

NRCS

Natural Resources Conservation Service

Attachment 2 (1 of 2)

Oklahoma NRCS Mentor Program Mentee Application

Date _____ Pay Grade GS _____ Name _____

Position _____

Office _____ Address _____

Zone _____ City _____ State _____ Zip _____

Office Phone _____ Email _____

Education Background: Highest Degree _____

College Major (if appropriate): _____

Work Experience: *Months/Years with NRCS* _____ *Months/Years in current position* _____

Months/Years with Government _____

Previous Work and/or college experience:

Specific areas of expertise:

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Do you have any special requests regarding the selection of your mentor? If so, what are they?

Please list any professional development needs you and/or your supervisor have identified.

What are your long-term and short-term goals?

What would you like to accomplish as a result of this program?

If selected, I am committed to working with a mentor for the mandatory timeframe.

Applicant Signature	Date
Supervisor Signature	Date
ASTC (FO) **or** Principal Staff Signature	Date

Please send mentoring application to: Oklahoma Civil Rights Advisory Committee,
Att: David Hungerford Chairman, Stillwater Field Service Center, 2600 S. Main, Suite C, Stillwater, OK 74074.

Clear Form Print Form