
**University of Florida, Levin College of Law
Center for Career Services**

ALUMNI MENTOR PROGRAM

Full Name: _____

Address - Home or Business (circle one): _____

Home Phone: _____ E-Mail: _____

Business/Firm Name, City, State: _____

Business Phone: _____ Position: _____

Business/Firm Size: _____ Practice Areas: _____

Nearest Metropolitan Area: _____

Year Graduated from UF Law School: _____ Member of the Alumni Council? YES / NO

What student organizations did you belong to while in law school? _____

Undergraduate Institution: _____ Major: _____

Would you be willing to allow a student to shadow you at work for a limited period of time (usually one day to one week during the summer)? YES / NO

Are you interested in mentoring a student involved in one of the following diverse student groups?

- | | |
|---|---|
| _____ Lambda/Outlaw | _____ Spanish American Law Student Association |
| _____ Black Law Student Association | _____ Hispanic and Latino/a Law Student Association |
| _____ Jewish Law Student Association | _____ Law Association for Women |
| _____ Caribbean Law Student Association | |

Please return to: Jessie Howell Wallace, Director
Center for Career Services
University of Florida - Fredric G. Levin College of Law
PO Box 117630, Gainesville, Florida 32611-7630
Phone: (352) 273-0860, Fax: (352) 392-4640

Thank you for your support!