



A M E R I C A N G E M
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AGS Mentor Application Form

Instructions: Please complete all questions on the application and attach a copy of your current resume after the last page. This form must be filled out electronically. Handwritten applications will not be accepted.

1. Personal Information:

First and Last Name: _____

Job Title: _____

AGS Title(s): _____

Organization: _____

Organization Size (# employees): _____

2. Contact Information:

Work Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Fax: _____

Work E-mail: _____

Personal Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Personal E-mail: _____

Preferred Means of Communication:

Personal E-mail Work E-mail

Phone Face-to-face

3. Work Experience:

a. Experience (years): _____ Other Professional Experience (years): _____

Retailer Supplier



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b. Briefly describe the major responsibilities in your current position:

4. AGS Membership, Certifications and Leadership Activities:

a. How long have you been an AGS Member? _____ Local Guild Member? _____

b. Are you a Titleholder? _____ Title? _____

c. Please list any professional accreditations and/or awards you have received?

d. Please indicate any other professional associations and/or civic activities with which you are affiliated:

e. What is the most rewarding part of your job?

f. What are your top three priorities, in descending order, for being matched with a mentee?

- _____ Similar career interests
- _____ Live/work in similar geographic area
- _____ Experience in a similar business
- _____ Experience in a competency area I would like to build skills in



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g. Why do you want to be a Mentor?

h. What do you feel you could offer as a Mentor?

i. What do you hope to gain from this leadership position?

j. What are your skills? What is your area of expertise?

k. Additional comments:
