

## **Denise Henning Connections**

· Coordinated by the Association for Women Lawyers of Greater Kansas City and AWL Foundation ·

### **Application for Mentee Candidates for 2019 Class (Please print or type)**

NOTE: Applications must be received on or before **5:00 p.m. C.S.T. September 14, 2018**. Timely submission of this application is a prerequisite for consideration. Submit completed applications by e-mail to:

Karan Garrison  
AWLF Executive Director  
Email: kgarrison@offmyplatter.com  
Phone: 816-304-3799

\*If you send the application via e-mail and do not receive a reply confirming receipt within 48 hours, please resend and/or call Karan. You may have been blocked by a Spam filter.

***Openings:*** We are accepting applications for the 5 Associate (mentee) participants. Denise Henning Connections is coordinated as an AWL member benefit and all participants must be current AWL members before the first Denise Henning Connections meeting in January 2019.

***Term of Program:*** The 2019 class of Denise Henning Connections will meet for the entire calendar years of 2019-2023.

***Meetings:*** Group meetings occur during odd number months beginning in January 2019, with Mentor/Mentee meetings occurring during even number months beginning in February 2019. Effort is made to set the entire 2019 program calendar before the initial meeting so that participants can plan ahead for all events. Attendance at all meetings is a required component of the program in order to ensure its success.

***Cost:*** At this time the program is funded by way of the Mentors. The Mentors graciously provide for the program expenses by paying for the meeting costs for their self and Mentee. This includes paying for the one-on-one meetings or outings.

## **Denise Henning Connections**

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Date: \_\_\_\_\_

### **Contact Information**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

#### **Work**

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work phone: \_\_\_\_\_ Work fax: \_\_\_\_\_

#### **Home**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

### **Association for Women Lawyers of Greater Kansas City (AWL) Membership**

Are you a current member of AWL? \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, are you a past member? \_\_\_\_\_ No \_\_\_\_\_ Yes, when: \_\_\_\_\_

If no, do you understand that you must be a member of AWL in order to participate in Denise Henning Connections and will you submit your membership application to join/rejoin AWL? \_\_\_\_\_ Yes \_\_\_\_\_ No

Describe your past participation with AWL programs or socials: \_\_\_\_\_

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**Connections Information**

How many years have you been practicing law? \_\_\_\_\_

In what state bars are you licensed to practice law? \_\_\_\_\_

What are your principle areas of law practice? \_\_\_\_\_

How did you find out about Denise Henning Connections? \_\_\_\_\_

Are you involved in any other law related organizations? \_\_\_\_\_ No \_\_\_\_\_ Yes, please describe: \_\_\_\_\_

Are you involved in any community organizations? \_\_\_\_\_ No \_\_\_\_\_ Yes, please describe: \_\_\_\_\_

Why do you want to be a mentee?: \_\_\_\_\_

Do you have any previous experience with a mentee program? \_\_\_\_\_ No \_\_\_\_\_ Yes, please describe: \_\_\_\_\_

Can you meet with the group and your mentor as often as our program requires? (See Program Introduction for more information)  
\_\_\_\_\_ Yes \_\_\_\_\_ No, please explain: \_\_\_\_\_