



Mentorship Program

Mentee Questionnaire

Name _____ Gender M F

E-mail _____

Phone #'s WORK: _____ CELL: _____

Preferred method of contact by your mentor (e.g. phone, e-mail, in-person, text) _____

In which municipality do you reside? _____

By which municipality are you employed? _____

What is the approx. population & budget of your municipality? _____

Date (MM/YY) you passed the CMFO Exam _____

Which statement best describes your previous municipal finance experience:

I have no behind-the-desk CMFO experience

I have been acting as a temporary CMFO for some time now

Other _____

Explain why you want to be mentored: _____

While we cannot make any promises, do you prefer to be mentored by (circle one):

Male Female Doesn't matter

Are you a member of the GFOA?: Yes No

In what areas of the job do you feel confident/strong? _____

In what areas of the job do you feel the weakest? _____

Please submit the completed form to Sharon Smith at SharonESmithNJ@gmail.com. You will receive information about your mentor (e.g. bio, contact information) in approximately 10 days as well as a brief list of expectations as a mentee. ***Your mentor will make the first communication with you utilizing your preferred method of contact indicated above.*** Best wishes to a successful career as a municipal finance officer!!

Sincerely, The GFOA of New Jersey