

DALLAS AREA PARALEGAL ASSOCIATION'S WENDI A. ROGERS MENTOR PROGRAM

Application for Prospective Protégé

Name:			
Mailing Address:			
Firm/School:			
Telephone:		Facsimile:	
Email Address:			
Practice Area(s)			
Are you a current DAPA member?		Are you currently a Paralegal Student?	
Number of Years of Substantive Paralegal Experience		Anticipated Graduation Date:	
I am requesting a Mentor for the following reasons:	_____ Career objectives		
	_____ Education goals		
	_____ Current information on the paralegal profession, including certifications		
	_____ Resume review and tips for interviewing for a paralegal position		
	_____ Other:		

As a Protégé of DAPA, you hereby agree that you are a member in good standing of DAPA, that you have three			
Signature:			
Date:			
<small>For DAPA Use Only</small>			
Date Received:		Date Matched:	
Name of Mentor:			

Submit completed forms to mentor@dallasparalegals.org.