**I’Anson-Hoffman Inn of Court**

**Mentorship Preferences Form**

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| --- | --- |
| **Your Name** |  |
| **Your Email** |  |
| **Your Work Address**  (If a student, please include  both home and school  mailing addresses) |  |

I am unable to commit to a mentoring relationship this year;

OR

I would like to be paired with a colleague. Please consider the following in making the assignment:

|  |  |
| --- | --- |
| LOCATION: |  |
| PRACTICE AREAS: |  |
| YEARS IN PRACTICE: |  |
| OTHER RELEVANT FACTORS: |  |