

HNBA & SDRLA

Law Student Mentor Program

Name:

E-mail:

Telephone Number:

Gender: Male Female

Firm or Business Name:

Work Address:

Position:

Law School Graduation Year:

Hispanic / Latino or Latina?: Yes No

Hobbies/Interests:

Undergraduate and Graduate School(s), Degree(s), Major(s), Year(s) of Graduation:

Type of Practice:

Occupation other than Law:

Legal position(s) prior to current position or practice:

Student Preference: Male Female No preference

Number of students that you would be willing to mentor: