

Society of Broadcast Engineers

Mentor Program – Mentor Application



Date: _____ Name: _____

SBE Member Number: _____

Thank you for your interest in the SBE Mentor Program. Members like you make it possible to offer quality programs to you and your peers in broadcasting. Please complete this application to help the SBE understand your expertise and interests. In doing so, we can better match mentors and mentees. We also ask you to submit a resume or CV.

Contact Information

Employer: _____

Job Title: _____ Years of Experience _____

SBE Certifications you hold: _____

Personal Mailing address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Preferred method of contact: Phone Email

Best time to contact _____

Experience/Industry Background Radio TV RF IT

Please indicate technologies, subjects, and/or skills within broadcast engineering with which you are proficient and could provide mentorship for:

Additional Comments

Examples: experience you have with other mentoring efforts, public speaking experience, unique opportunities or facilities available to assist in mentoring. *(Use additional paper as necessary.)*

Complete and return this form to Cathy Orosz at the SBE

Society of Broadcast Engineers
9102 N. Meridian St, Ste. 150 • Indianapolis, IN 46260
317-846-9000 • 317-846-9120 fax • sbe.org • corosz@sbe.org