**ASSOCIATION OF FUNDRAISING PROFESSIONALS CA, DESERT COMMUNITIES CHAPTER**

Professional Mentor Program: Mentor Application

This member only benefit provides, at no cost, one-on-one mentoring\* to advance the skills of those newer to the profession or help mid-level professionals seeking to develop new skills in fundraising. In order to be considered for enrollment you must be in good standing and employed as a fundraising consultant or by a 501 (c) (3) nonprofit organization.

\**A mentor is a more experienced professional in the field of fundraising who takes a personal interest in the career progression, provides advice, insight, constructive criticism and general support of a mentee’s progress.*

NAME:

JOB TITLE: ORGANIZATION:

ADDRESS: CITY: STATE: ZIP:

PHONE: CELL: EMAIL:

Please complete the following:

1. Are you a member of AFP? q Yes q No

If yes, when did you become a member?

If no and you are selected for the Mentoring Program, you must become a member within one month of this application. If you are unable to afford the AFP Chapter Membership, please contact us for more information and possible assistance.

1. Number of years of experience in fundraising:
2. Is your primary responsibility fundraising: q Yes q No
3. What percentage of your time do you spend on fundraising? %
4. Your response to this section will help the Mentoring Program Committee select a mentee and structure aspects of the curriculum that will meet the training and professional development needs of your mentee. Indicate areas in which you have skills:

\_\_\_\_\_Annual Giving \_\_\_\_\_Strategic Planning

\_\_\_\_\_Major Gifts Fundraising \_\_\_\_\_Stewardship

\_\_\_\_\_Corporate and Foundation Relations \_\_\_\_\_Prospect Research

\_\_\_\_\_Development Finance & Accounting \_\_\_\_\_Grant Writing

\_\_\_\_\_Capital Campaign Fundraising \_\_\_\_\_Special Events

\_\_\_\_\_Organizational Development \_\_\_\_\_Development Ethics

\_\_\_\_\_Board Development & Training \_\_\_\_\_Volunteer Training

\_\_\_\_\_ Social Media \_\_\_\_\_Making Presentations

\_\_\_\_\_Marketing

1. From the list above please select your top three skills:

1.

2.

3.

1. You will be paired with a mentee for the entire program. What would you look for in an ideal

mentee personally and professionally? Are there specific attributes that you identify with strongly that you would align with in a mentee (e.g. of self-identification includes but is not limited to: African-American/Black, Asian, People with Disabilities, Faith-based, LGBTQ, Hispanic, Jewish, Rural, or another underrepresented community)?

**AGENCY OR CONSULTING FIRM**

501(c) (3) non-profit organization name:

Consulting Firm name:

Specialty: Education Health Care Social Service Other (specify)

* Number of years your organization or consulting firm has been in existence:
* How many fundraising staff does your organization have?

Please email to:

AFP CA, Desert Communities Chapter

afpcadesert@gmail.com

Subject Line: Professional Mentor Program Application

Thank you!

Jolivas; November 17, 2020