



Mentoring Services

The mentor program encourages informal and confidential working relationship between experienced members of the fundraising profession (mentors) and those who are new to the profession, or who are seeking guidance and advice in their careers (mentorees). Those who participate in the program must be members of AFP Maryland. The mentor may help the mentoree with questions related to: development activities/methods, identifying needed resources, and career advice, as well as serving as a sounding board on specific fundraising concerns. Once the Mentoring Committee matches a mentor to a mentoree, the mentoree will initiate contact with the mentor. The matched pair will jointly agree on frequency, duration and style of communication (in-person, telephone, email, or a mix).

Mentors are available for a one-time consultation and longer terms (maximum 12 month). A mentoree whose employer needs programmatic assistance or long-term consultation is encouraged to hire professional counsel.

AFP-MD Mentor Application

Name _____ Office Phone _____

Title _____ Employer _____

Address _____ City _____ State _____ Zip _____

E-mail _____

1. Total years in fundraising ____ Total years in AFP ____

a. Fundraising areas in which you would be willing to advise less experienced AFP members :

- Annual Fund Grant Writing Corporate Support Government Support
- Capital Campaign Planned Giving Special Events Board Development
- Managing Staff Major Gifts Daily operations of a development office
- Other (describe): _____

b. Environments in which you have experience:

- Healthcare University Religious Environmental
- Human Services Secondary Education Other (describe): _____
- Arts/Culture/Humanities

c. Comments:

Please complete and return this form to:
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Baltimore, MD 21201
Phone: (410) 706-5489
Fax: (410) 706-2995
dnarango@som.umaryland.edu

Committee Use Only:
Date of Match Notification: _____
Date of Match Notification: _____
Committee Member Assigned for Follow-Up: _____
Date Initial Follow-Up Call Completed _____
Date of One Year Evaluation Contact _____
Evaluation Completed _____