|  |  |  |  |
| --- | --- | --- | --- |
|  | **NEAR EAST UNIVERSITY** | | |
| **STUDENT MENTORSHIP APPLICATION FORM** | | | |
|  |  |  |  |
| **Candidate’s Full Name** |  |  |  |
|  |  |  |  |
| **Student Number** |  |  |  |
|  |  |  |  |
| **Department / Program** |  |  |  |
| **of Study** |  |  |  |
|  |  |  |  |
| **Year of Study** |  | **Application Period** |  |
|  |  |  |  |
| **Head of the** |  |  |  |
| **Department / Program** |  |  |  |
| **Coordinator** |  |  |  |
|  |  |  |  |

**Letter of Intent**

*Please outline below your reasons for applying for the position of student mentor in your department.*

**

**ONLY FOR THE USE OF THE DEPARTMENT**

|  |  |
| --- | --- |
| **Decision of the Departmental Executive Board** | **Approved** |
|  | **Rejected** |
| **Departmental Executive Board Members** | **1.** |
|  | **2.** |
|  | **3.** |
| **Date** |  |