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Mentee Application Form

Please enclose: your CV, your publication list,  
and your motivation letter (about half a DIN A4 sheet why you wish to become a mentee)

### Personal Details

Family Name Please click here to enter text

First Name Please click here to enter text

Date of Birth Please click here to enter a date

Nationality Please click here to enter text

Have you got any children? No  Yes

Number Please click here to enter text Age Please click here to enter text

### Office Address

Institute / Department / Company

Street Please click here to enter text Number Please click here to enter text

Postal Code Please click here to enter text Town Please click here to enter text

Telephone Please click here to enter text

Cell phone Please click here to enter text

Email Please click here to enter text

### Private Address (only if you want to be contacted privately)

Street Please click here to enter text Number Please click here to enter text

Postal Code Please click here to enter text Town Please click here to enter text

Telephone Please click here to enter text

Cell phone Please click here to enter text

Email Please click here to enter text

Which of these two addresses do you prefer to be used? Official  Private

May these contact dates be listed in a networking email list? Yes  no

### Education History

University / town Please click here to enter text

Major subject Please click here to enter text

Finale degree Please click here to enter text Grade Please click here to enter text

Graduation year Please click here to enter text

Begin of dissertation Please click here to enter text

Assumed completion Please click here to enter text

Supervisors

Please click here to enter text

Please click here to enter text

Please click here to enter text

Please click here to enter text

### Desired Career

Research and Teaching  Business and Industry  Politics   
Public Administration  University Hospital

Others Please click here to enter text

### Participation in the Mentoring program

Have you participated in a Mentoring program before? Yes  No

If yes, in which program? Please click here to enter text

### Which benefits do you expect from the Mentoring program?

Support in defining my strengths and weaknesses

Advice in planning my career

Getting involved in networks

Strategies for a work-life-balance

Insight into specific working fields:

Research and Teaching

Business and Industry

Politics

Public Administration

University Hospital

Others Please click here to enter text

Would you like to propose a mentor? No  Yes

If yes, please give contact data Please click here to enter text

### Commitment

I declare that I will be a committed mentee and that I will participate in the MENTORING life sciences program: in all events and in the evaluation. I am aware that absenteeism without giving any reasons may lead to exclusion. I herewith register for the MENTORING life sciences program as a mentee.

Place Please click here to enter text Date Please click here to enter text

(e-)Signature Please click here to enter text