This application is for those applying to be mentees in the 2014-15 mentoring program hosted by the Cincinnati Chapter of the National Federation of the Blind.

Requirements

\*You must be in between the ages of 12-19.

\*You must be blind or visually impaired.

\*You must be willing to talk to your mentor and work with them at regular intervals.

Please answer the following questions. These questions are not meant to stack you up against other aplicants, but rather so I can get a general sense of how I need to plan the program and what your specific needs are. You may or may not need to complete a phone interview after your application is reviewed.

Aplications must be submitted to me by email by December 5th.

My email is

lilliepennington@fuse.net

And my phone number is 513-680-5411

Please email or call with any questions.

If you know someone who has a need for a braille application, please let me know or have them contact me. Aplications should preferably be emailed to me in either doc/docx, txt, or brf file extensions.

Name:

Age:

Email:

Phone number:

Hobbies/interests:

Have you been thinking about what careers or jobs you are interested in when you grow up?

If so, what jobs/careers have you been thinking about?

Are you aware of the general requirements/steps in order to enter this career?

Are you aware of things such as job outlook/growth for these careers?

What accomidations do you think you would need in these careers, if any?

Do you know any blind/visually impaired people who are currently in these fields?

Have you made any contact with them about the career?

If so, what have you talked about?

If possible, please list the name(s) of the people you have contacted.

Are you part of any devisions or listserves that talk about blind people in your field such as the NFB human services devision?

What do you think you would gain from having a mentor who worked in a career that you were considering?

What do you think you could gain from having a blind mentor?

List your strengths and weaknesses related to blindness, and elaborate if necessary.

What is your preferred reading medium?

Do you like using electronic files?

If you read braille, how much do you know?

What are your computer/technology skills like?

What assistive technology do you use?

What do you think a mentor could help you with?

What would you like to work with your mentor on?

Do you have any other comments, suggestions, or considerations?

When emailing your application back to me, please change your file name so your name is in the file name along with mentee application. For example, Lillie’s mentee application.