



**IMLA Mentorship Program  
Mentee Application Form**

**Full Name of Mentee**

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**Title**

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**Name of your Employer**

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**Position Held with Current Employer**

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**How long have you been practicing Local Government Law?**

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**Contact Information (Email/Phone)**

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**Employer Address**

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**Please list your previous employer (if any), position held, and dates of employment**

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**Please email the completed form to IMLA: [info@imla.org](mailto:info@imla.org)**

**Subject matter interest (you can list more than 1)**

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**Population size of your local government (if applicable)**

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**Where are you licensed?**

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**Any other information relating to your interest in having an IMLA mentor?**

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I hereby certify that I am an attorney licensed to practice in the United States or Canada, registered active and in good standing.

I agree to make the necessary time commitment to maintain a mentorship relationship as described in the IMLA Mentorship Program. If my work or life circumstances change so that I cannot be involved in the program, I will contact IMLA.

**Signature**

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**Date**

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**Please email the completed form to IMLA: [info@imla.org](mailto:info@imla.org)**