



Mentor Application

Business Name	
Contact	
Address	
Phone	
Email	
Type of A&E Services	

1. Please list specific areas in which your firm would be willing to mentor.

2. Please indicate the number of protégés you are willing to mentor: _____

3. How much time can you commit per protégé? _____ per month

4. Has your firm worked with any of the following agencies?

- | | | |
|--|------------------------------|-----------------------------|
| a. Caltrans | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Metro / OCTA / RCTC / SANBAG / VCTC | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Local Agencies | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Other Governmental Agencies | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

5. Describe previous experience in mentoring with any of the above listed agencies.

Please attach a brief summary of your company profile and submit completed application to:

Department of Transportation – District 7, 8 & 12

Email to: d7.ppm.consultant.services.unit@dot.ca.gov

Or mail to:

Department of Transportation
Division of Program & Project Management
Office of Consultant Services, MS-2
Attn: Irmalinda Osuna or Sylvia Sanchez
100 S Main Street, Los Angeles, CA 90012