NSEA Intergenerational Mentoring SEAN Application

NAME			
ADDRESS			
PHONE			
EMAIL			
Yr. in School	S	J	Sr.
Major			
Education Emp	phasis		
Ideal St. Teacl	hing Grade L	_evel	
SEAN Member If yes, ho		No	
Activities/Lead	dership roles	s in SEAN cha	ıpter?

What do you envision being good about having a mentor?

When completed, please submit by email or mail to:

NSEA 605 S. 14th Street Lincoln, NE 68508