

Mentor Questionnaire

Name:

Email:

Home Phone:

Cell Phone:

Please answer the following questions to help the mentoring coordinators create optimum pairings.

- 1. Approximately how many ACBL masterpoints do you have?**
- 2. What level of mentee would you be most comfortable mentoring?**
- 3. What games (online, face-to-face, limited or open) would you be willing or not willing to use for mentoring?**
- 4. Is there someone you already help or would like to mentor?**
- 5. Please list times (morning, afternoon, evening) and days of the week you are willing and available to play with a mentee.**
- 6. Do you have a preferred day, time and type of play for mentoring (e.g. Tuesday morning open game at HBC).**
- 7. If the Jan-April 2024 time frame doesn't work for you, what time frame(s) work for you?**