



S O U R D O U G H
B U S I N E S S P A T H W A Y S

Mentee Information Form – Meeting #1

Name: _____
Business Name: _____
Mobile: _____
Phone: _____
Email: _____
Website: _____
Meeting #1 date: _____

Background interview questions:

Education and skills	
Business/career experience	
Current business/start up	

Mentoring needs

What are your business goals for the next five years?	
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In what specific areas would you like mentoring support?

Meeting #1 notes

Meeting #1 Actions and agreements

Mentor signature _____

Mentee signature _____