

PPGH Mentor Information Sheet

Contact Information

NAME:		COMPANY NAME:	
ADDRESS:		PHONE - OFFICE: PHONE - CELL:	
WEBSITE: (if applicable)		EMAIL:	

Industry Experience

CURRENT EMPLOYMENT:			
PLEASE CHECK BEST DESCRIPTION(S) FOR ABOVE EMPLOYMENT:	<input type="radio"/> Owner <input type="radio"/> Photographer <input type="radio"/> Videographer <input type="radio"/> Retired/Sabbatical <input type="radio"/> Manager <input type="radio"/> Designer <input type="radio"/> Sales <input type="radio"/> Exploring New Opportunities <input type="radio"/> Other	YEARS IN THIS CAPACITY:	
PREVIOUS EXPERIENCE:			
TYPE OF PHOTOGRAPHY: (check all that apply)	<input type="radio"/> Wedding <input type="radio"/> Portrait <input type="radio"/> Sports <input type="radio"/> Events <input type="radio"/> Family <input type="radio"/> Child <input type="radio"/> Seniors <input type="radio"/> Other		
STYLE OF PHOTOGRAPHY: (check all that apply)	<input type="radio"/> Traditional <input type="radio"/> Classic <input type="radio"/> Contemporary <input type="radio"/> Natural Light <input type="radio"/> Lifestyle <input type="radio"/> Other		

Guild Experience

YEAR JOINED:		CURRENT MEMBER? (Y/N)	
OFFICES HELD/ COMMITTEE WORK/ PRINT COMPETITION/ OTHER:		OTHER INFORMATION YOU WISH TO SHARE:	

Areas of Expertise

(Categories shown below are meant to trigger ideas. Please check all that apply and add additional info as needed.)

General Photography Knowledge

- Camera Equipment and Usage Lighting Equipment and Usage Posing Work Flow/Technology
 Composition History Other

Business

- General Business Networking/Social Media Management/Staffing/Hiring/Firing
 Pricing/Financial/Accounting Sales/Marketing/Advertising Time Management/Organizational Skills
 Studio Space/Real Estate/Leasing/Planning Other

Complementary Art Experience

- Art School
 Art History
 Design (Interior/Graphic/Fashion)
 Sculpture/Painting/Mixed Media/Other Media
 Exhibits/Teaching/Other
-

PPA/SWPPA/TPPA/Local Guild/or Other Association Knowledge

- Print Competition
 Training/Speaking
 Leadership Skills
 Other
-

The Client Experience

- Dealing with Difficulties
 Consultations
 People Skills
 Planning
 Checklists
 Other
-

Mentor Objectives

Reasons You Wish to Participate

- Giving Back
 Elevate Industry and Competition
 Other _____
 Learn *From* Protégés
 Future Business Partners
 Connect/Network with Others in Industry
 To Return to Industry and Learn Current Trends
-

Logistical Requirements to Facilitate Your Meetings

GEOGRAPHICAL RESTRICTIONS: (e.g. if you do not wish to work with someone located in your direct marketplace)			
TYPE OF MEETINGS YOU PREFER:	<input type="radio"/> Lunch Meetings <input type="radio"/> Drinks in the Evenings <input type="radio"/> Hands-On practical training on-location/in-studio/other <input type="radio"/> Assist during sessions <input type="radio"/> Phone Calls <input type="radio"/> Other	RELATIONSHIP WITH PROTEGE: (e.g. one off meetings with a variety of proteges and/or spend more time developing one(or more) individuals?	
HOURS PER MONTH YOU ARE WILLING TO COMMIT:		PLEASE NOTE ANY TIMES OF YEAR THAT WILL BE DIFFICULT TO COMMIT, IF ANY:	
ANY OTHER RESTRICTIONS			

Additional Information

Please add any information we may not have addressed above that you feel will help in matching you with an appropriate protégé.
