

HRACO Membership Questionnaire

The HRACO Board requests that you complete the following questionnaire to help us determine which members may be interested in participating in a mentoring program (either as a mentor or as a mentee).

Please turn in your completed form at any HRACO meeting or by email to Danica Pennock, Mentoring Program Chair, at dpennock@westerntitle.com.

Name: _____ Title: _____

Cell phone: _____ Email address: _____

Current Employer: _____

Certification: PHR SPHR GPHR Calif. Certification

Member of SHRM? Yes No Member of HRACO? Yes No

Yrs in HR field? _____ Yrs in mgmt? _____ Union experience? Yes No

Education: _____

Industries where you have practiced HR: _____

Areas of specialization: _____

Areas of interest: _____

Please indicate your interests in the following areas so that, as your professional organization, we can support your needs and areas for growth and development:

1) Are you interested in participating in a mentoring program? Yes No

2) If yes, please indicate which role interests you and what would you hope to gain from this relationship?

Mentee _____

Mentor _____

3) What time commitment do you have, anticipate, or expect to receive/give as a mentee or mentor? Weekly Monthly Other

Comments: _____

Please feel free to share constructive feedback and ideas with any of the HRACO Board Members at any time. *Thank you* for completing and returning this questionnaire!