



OCRA MENTOR PROGRAM

STUDENT APPLICATION FORM

Qualifications: Students must be currently enrolled in a court reporting program and must maintain OCRA student membership.

NAME:
ADDRESS:
CITY, STATE & ZIP CODE:
PHONE:
E-MAIL:

Currently enrolled at: _____

Current speed _____ **wpm**

	Yes	No
Currently a member of OCRA?	_____	_____
Currently a member of NCRA?	_____	_____
Own a computer CAT system?	_____	_____
Which one? _____		

Professional Goals:

We would like to match you with a mentor in your area of interest. If you know or have a good idea about your career goal, please indicate.

Officialship/Court	_____	_____
Freelance/Deposition/Arbitration	_____	_____
Realtime in Hard-of-Hearing/ Captioning settings	_____	_____
Realtime in Legal settings	_____	_____
Undecided	_____	_____

Any comments or preferences, i.e., geographic location of mentor, times of day available to meet, preference for telephone or e-mail contacts, etc.

Please return form to:

Terri Mundt, Chairperson
OCRA Student Liaison Committee
8975 SW Turquoise Loop
Beaverton OR 97007
(971) 246-5045; terrijmundt@cs.com