

Resort & Hospitality Management Mentor Program Application Form
for Students

Name: _____

Address: _____

Email: _____

Phone Number: _____

Student Status: _____

Industry Segment Preferred: (circle all that apply)

Resort Management Hotel Management Club Management

Restaurant Management Event Management Spa Management

Timeshare Management Other: _____

What do you hope to learn/gain by participating? _____

Please list current or past hospitality
experience_____

Please fax or mail to:
Florida Gulf Coast University
10501 FGCU Blvd. South, Modular 2
Fort Myers, FL 33965-6565
Fax: 239-590-7863
Any questions please call 590-7742