womeninfilmseattle
connection. education. support.

Women in Film Seattle
Mentorship Program Application

(PLEASE PRINT)

Name _____

Phone _____

Email _____

Membership (check one) ☐ Student ☐ Associate ☐ Friend ☐ Professional

What is your area of interest in film/video production?

_____

_____

_____

What is your experience/skills/education?

_____

_____

_____

Please write a brief statement about yourself and tell us how you hope to benefit from the Women in Film Mentorship Program. (use separate sheets of paper if necessary)

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____