



Capital Region Human Resource Association



Student Enrollment Form for CRHRA Human Resources (HR) Mentoring Program

Name: _____

Address: _____

Phone: _____

E-mail: _____

Best time to contact: _____

Please select the areas of HR that you would like to learn or gain more experience in:

- Compensation and benefits
 Recruiting/Selection
 Labor Relations/Legal
 Employee Relations/Performance Management
 Training & Development
 HRIS

Briefly outline any HR experience and/or HR internships that you have participated in (attach a current copy of your resume):

Is there anything specific you want to achieve from this program?

Education:

Major: _____

Year in school: _____

College: _____

Expected graduation date: _____

Department Advisor, Professor, or Career Services Professional

Signature

Date