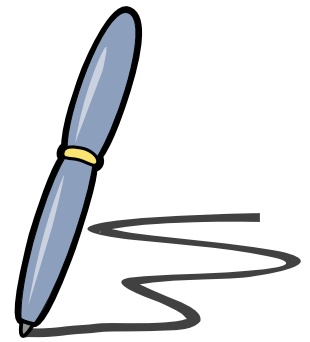


# Dental Front Desk Mentorship Program



Please complete and submit your application to me by email at [aprildeneanthompson@asthedrillturns.com](mailto:aprildeneanthompson@asthedrillturns.com). Then, watch your email for my prompt reply. Talk to you soon!

**1. Your Name & Contact Information? Are you the mentee or is this for another person on the team?**

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**2. Your Location & Time Zone**

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**3. Current Job Title & Function of Mentee**

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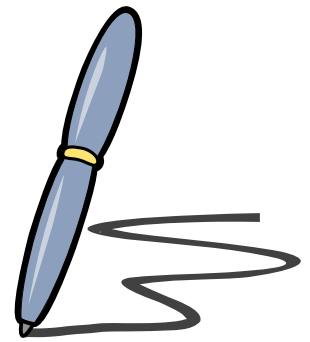
**4. Would you prefer to schedule Zoom or Phone calls for our weekly 60-minute sessions?**

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# Dental Front Desk Mentorship Program



Page 2

## **5. Preferred Day of the Week & Time of Day**

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## **6. When would you like to begin?**

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## **7. What would you like to accomplish in our month of working together?**

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## **8. What do you see as the greatest challenges in this?**

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