



# VPPPA Mentoring Program Mentoring Application Form

Thank you for expressing interest in the VPPPA Mentoring Program! Please fill out this form completely so we may match your site with a mentor that most closely meets your needs.

Are you looking to become a VPP site?

- yes       no  
 just need general safety & health support

Are you interested in participating in the OSHA Challenge Pilot?

- yes       no       don't know

Contact Name/Title:		
Company:		
Street Address:		
City:	State:	Zip code:
E-mail:		
Phone:	Fax:	
SIC code:	Number of Employees:	

Briefly describe what your site produces and/or its functions:
--

If your site has been working with a current VPP participant, please indicate which site:	
Contact Name at that site:	Phone:
If possible, would you like to work with this site as your official mentor?	

Please indicate by rating the importance of the following characteristics with "1" as the most important.

- Whether the site has a union  
 Similar Industry  
 Geographic proximity

Check preference:

- Union     Non-union

Names of unions at your site:

Return to:

Sanna Raza

VPPPA

7600-E Leesburg Pike, Suite 440

Falls Church, VA 22043-2004

Tel: (703) 761-1146 Ext. 311

Fax: (703) 761-1148

E-mail: [Mentoring@vpppa.org](mailto:Mentoring@vpppa.org)

