



APPLICATIONS DUE
OCTOBER 12, 2018

2018-2019 EXECUTIVE MENTORSHIP PROGRAM
PROTÉGÉ QUESTIONNAIRE

Name: Title: Date:
Employer/University:
Address:
Phone: Please Indicate: Cellular Home Office
E-Mail: Preferred method of communication:

Please Note: Protégés must be healthcare graduate students or recently graduated graduate students or careerists in good standing with ACHE national.

Your responses to the following questions will be used for the sole purpose of matching you with a Mentor. The ACHE – SETC Executive Mentorship Program Committee will implement this mentorship program, with strategic oversight from the ACHE – SETC Board of Directors.

1. What aspects of the current healthcare environment are you most interested in? (Please rank your top 3 choices)

Table with 4 columns of healthcare categories: Alternative Care, Business Development, Physician Practices, Information Systems, Long Term Care, Mergers/Acquisitions, For-profit, Marketing, Ambulatory Care, Corporate Compliance, Quality Assurance, Other - (please list), Managed Care, Hospital Operations, Human Resources, Behavioral Care, Finance, Strategic Planning.

2. In which professional/community associations are you involved, or have been involved. (Check all that apply)

Table with 4 columns of professional associations: ACHE (National), AHA, Civic Clubs, AMA, ACE - SETC, NAHSE, United Way, Other - (please list), Chamber of Commerce, MGMA, AHHE, Fraternal Organizations, HFMA, AONE, Youth Organizations, THA, Other.

3. Please identify your university and list all the healthcare courses you are currently enrolled in.

Blank lines for university and healthcare courses.

4. What year are you in graduate school?

1st year graduate student 2nd year graduate student completed graduate school in

5. How far are you willing to travel (one way) to meet with your mentor? 1 - 5 Miles 6 - 10 Miles More

6. What is your graduate degree? (In progress or completed) (Please check all that apply)?

MHA MBA MPH other - please specify

7. How many years of healthcare management experience do you have?

None < 2 years 2-5 years more than 5 years

8. Have you been a mentee or protégé before (for any organization)? Yes No

If Yes, which organization?

9. Very briefly, what are your career goals?

10. Please share 2 objectives you hope to gain from the mentorship program:

Faculty Advisor or Supervisor Signature (required):

Print Name of Your Advisor/Supervisor:

(Faculty Advisor/Supervisor, by signing this, you endorse this student as a candidate for the ACHE Executive Mentorship Program)

Return completed form by September 28, 2018 to:

Ashley McClellan, FACHE
Chief Executive Officer
The Woman's Hospital of Texas
ashley.mcclellan@hcahealthcare.com