**SafeBuild Alliance Mentoring Program 2016-17**

SafeBuild Alliance Membership Application

**Business Information**

Business Name

Mail Address

|  |  |  |
| --- | --- | --- |
| City  | State  |  Zip Code  |

Physical Location

|  |  |  |
| --- | --- | --- |
| City  | State  |  Zip Code  |

|  |  |
| --- | --- |
| Federal Tax ID #  | Website  |

**Primary Contact**

|  |  |
| --- | --- |
| Name  |  Title  |

Mail Address

|  |  |  |
| --- | --- | --- |
| City  | State  |  Zip Code  |

|  |  |
| --- | --- |
| Phone  |  E-mail  |

**Billing Contact –** If a billing Person is not specified, the Primary Contact will automatically be considered primary.

|  |  |
| --- | --- |
| Name  |  Title  |

Mail Address

|  |  |  |
| --- | --- | --- |
| City  | State  |  Zip Code  |

|  |  |
| --- | --- |
| Phone  |  E-mail  |

To help us assess how you might be best served in the SafeBuild Alliance mentorship program, please provide the following information?

Why do you want to participate in the SafeBuild Alliance mentorship program?

Are you able to commit to meeting once per month (for 9 consecutive months) with your mentor?

Leaders within a company are key to shifting the culture toward a zero incidents. Which company leaders are supporting the mentorship program and are they willing to also participate in the mentorship program when necessary?

What are the strengths and weaknesses of your current safety culture?

What do you hope to gain by participating in the SafeBuild Alliance mentorship program?

Do you have a preference of the type of contractor you would like to mentor with? GC/Trade/Specialty? Is there a specific contractor you would like us to help partner you with for this mentorship?

\

**Member Commitment**

We agree to promote the mission of SafeBuild Alliance: To provide support for and encourage highly collaborative and innovative cultures to achieve an injury-free workplace.

|  |  |
| --- | --- |
| **Signature**  | **Date**  |
| **Print full name**  | **Title**  |

**Cost**

A special SafeBuild Alliance membership fee for mentees in the mentorship program is $100. This is a discount of $400.

The fee is subsidized by MDU grant in the amount of $200 and an in-kind contribution of $200 from SafeBuild Alliance. Dues for mentees cover the 2016 and 2017 calendar years.

Please make checks payable to SafeBuild Alliance and mail to: 3463 SW Binford Way, Gresham, OR 97080. If you would like to pay by credit card, please contact the SafeBuild Alliance office.