Mentee Request Form

First Name	Last Name	
Address		
City		
State	Zip	
Email	Phone	
Do you have bees no	ow? How long have you had them? How many hives	s?
What beekeeping cla	asses have you taken?	
Describe your beekee	eping goals: (circle all that apply)	
PollinationHoney Produ	 Raising / Selling Bees Saving Bees 	
 Learn somet Other (expla 	thing new • Community Educatio	'n
• Other (expla	in below)	
What is the extent of	f your beekeeping education?	_
	·?	
What size equipment	t do you plan to have?	
What is your timeline	e for: Having bees?	
	Having a mentor?	
Would you visit your	mentor's hives?	