

## **Mentorship Application Form - Mentor**

Thank you for applying to be a <u>mentor</u>. Please see the <u>mentoring guideline document</u> for further information. The information contained on the completed form is confidential and will not be shared with any persons other than the Mentorship Committee.

We request that you complete this form as fully as possible. The information you provide will help us to match you with a mentee that has development/learning needs that most closely meet your experience and skills.

	Vame:	Gender:			
Highest level of education:  Job Title:  Company Name:		Race:			
			Years (*Full t	of work experience: time post-education experience)	
			Ve ask	that you remain matched with you	r mentee for the duration of the programme.
1.	Please give a brief overview of your current job, main responsibilities and career to date.				
2.	Are you able to (have capacity and) commit ten hours in sixteen weeks to your assigned mentee? *				
	a. Yes				
	b. No				
3.	b. No  Please select the reason(s) for wantin	ng to be a mentor: *			
3.					
3.	Please select the reason(s) for wantin	ment			
3.	Please select the reason(s) for wanting a. Personal and career developed	ment elopment			
3.	Please select the reason(s) for wanting a. Personal and career develops b. Leadership and/or skills deve	ment elopment ofessional networks			
3.	Please select the reason(s) for wantin  a. Personal and career develope  b. Leadership and/or skills deve  c. Building and maintaining pre  d. Develop a community of lead	ment elopment ofessional networks			



5. How will you demonstrate your commitment to support your assigned mentee in achieving their short- and/or long-term goals? *	
6. What are some challenges you may face as a mentor? *	
7. Have you mentored a mentee before – formally or informally? *	
a) Yes (formally)	
b) Yes (Informally)	
c) No	
If yes, may you please indicate in what area was the mentorship focused on?	
Applicant Declaration	
The information on this form will be used by the mentoring matching group. By signing this agreement, you	
will abide by the guidelines of the mentorship programme, adhere to the mentoring scheme, actively	
participate in the mentoring process and contribute to the evaluation of the programme.	
SIGNED by the Industry Partner (Mentor)	
Signature:	
Name:	
Job Title:	
Date:	