**Mentor Application Form**

Complete this form, a summary of information about you will be shared with your mentee when a suitable match is identified. Mentors must be Journeypersons, Red Seal certification is preferred

**Date of application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- |
| **Mentee Contact Information** |  |
| **Name:** |  |
| **Area of work** |  |
| **Job tile/ position** |  |
| **Company employed by** |  |
| **Phone Number** |  |
| **Email** |  |
| **Red Seal** |  |

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| **Current Position/responsibilities** |  |
| **How long have you worked in your current company?** |  |
| **Briefly describe your primary responsibilities** |  |

**Relevant education history:**

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**Education courses you are currently enrolled in, or plan to enroll in with the next year**

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**Relevant Skills, Experience and Availability**

Your role as a mentor may include career guidance and professional development; however your role will not include assisting the mentee with finding employment, nor to provide tutoring services.

**Do you have a particular area(s) of expertise (both clinical and in skillset e.g. leadership training/ do you incorporate Adult learning principles into your practice)?**

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**What do you hope to gain from mentoring?**

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**Have you participated in a mentor/mentee relationship in the past? Describe the outcome(s):**

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**What is your availability to meet/ communicate with your mentor?**

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**List any comments or concerns/ Limitations:**

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**Receipt of your application will be confirmed by the Mentor Program Coordinator, and you will be contacted when a suitable mentor had been identified.**

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| **For Office use only** |  |
| **Date Application form received** |  |
| **Notes** |  |
| **Matched with** |  |
| **Date** |  |
| **Comments** |  |
| **Match not attained (reasons)** |  |