**Male Mentoring Programme**

**Mentee Application Form**

Thank you for applying to be a Mentee on TIGERS’ ICAN Mentorship Programme.

Please answer all questions as honestly as possible as Mentors will be matched with Mentees according to these answers.

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| --- | --- | --- | --- |
| **Name:** |  | | |
| **Address:** |  | | |
| **Date of Birth:** |  | | |
| **Telephone:** |  | **Mobile:** |  |
| **Email:** |  | **Job Title:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Company/School:** |  | | |
| **Address:** |  | | |
| **Contact Name:**  **Position:** |  | | |
| **Contact**  **Telephone:** |  | **Contact**  **Mobile:** |  |
| **Contact Email:** |  | **Nature of**  **Business (if applicable):** |  |

|  |
| --- |
| **Please give a brief overview of your current role, responsibilities and career to date. For school pupils, please give a brief overview of your year stage and the subjects you are studying.** |
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| **Why do you want to take part in TIGERS Mentorship Programme?** |
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| **Please detail what learning goals you would like to achieve and how might our Mentor help you achieve these.** |
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| **What are you looking for in a Mentor in terms of experience, skills or approach?** |
|  |
| **Please list your main interests / hobbies outside of work.** |
| |  | | --- | |  | |  | |
| **Are there any accessibility, geographical or time restrictions on your participation?** |
|  |

Thank you for completing your application to become a TIGERS Mentee. You will be notified of the outcome of your application 30 days from closing date of applications. The information which you give will be used for the following purposes: to enable TIGERS to create an electronic and paper record of your application; to enable the application to be processed. The information will be kept securely, and will be kept no longer than necessary.

**Applicant Declaration**

By signing this agreement you will have your manager’s approval to be a mentored and that TIGERS can share your contact details with your appointed Mentor. It is expected that you will attend all training events, adhere to the mentoring scheme, actively participate in the mentoring process and contribute to the evaluation of the programme.

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Line Manager Endorsement**

I confirm the applicant’s participation on the programme.

\*(Please see the mentoring guidelines)

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for completing this form. Please return to the postal or email address below.**