

BC Principals' and Vice-Principals' Association Mentoring Program

Mentee Application

Thank you for applying to become a mentee. Mentoring is a valuable process in which an experienced individual helps another person develop his or her goals and skills through a series of confidential, one-on-one conversations and other learning activities. As a mentee, you will have the opportunity to learn from your mentor, develop a supportive relationship, and deepen your skills as a school leader.

Please note that submission of this application, does not guarantee that you will be accepted as a mentee. Final selection is based on the completion of this application, and a match of interests with a current mentor.

Full Name: _____ Date: _____
Last First M.I.

School District: _____

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Phone: _____ Email _____

Have you had a mentor in the past? YES NO Are you willing to travel to meet with your mentor? YES NO

Are you able to commit to 1-2 hours per month to participate in a mentoring conversation with your mentor? YES NO How far would you be willing to travel? _____

Previous Teaching or School Leadership Experience

District/Position: _____

From: _____ To: _____ School District: _____

District/Position: _____

From: _____ To: _____ School District: _____

District/Position: _____

From: _____ To: _____ School District: _____

Mentoring Preferences

Preference for level:

- Elementary
- Middle
- Secondary
- K-12
- District Administration
- No preference

Preference for region:

- Metro
- Fraser Valley
- Van. Island
- Okanagan
- Kootenay
- Northern Interior
- Northwest
- No preference

Why do you want a mentor?

What are you looking for in a mentor?

What supports are currently provided for your professional learning and leadership development by your employer?

What skills and experiences would you like to develop as a result of being in a mentoring relationship?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____

Date: _____