



Business Mentoring Programme

Application Form

By posting this application form, I give permission for it to be passed on to the mentor / mentee who may be allocated to me.

Any mentoring activity I take part in is entirely at my own discretion.
I understand that **Business Mentors** accept no responsibility and may return this form unactioned.

Please complete relevant details below and then post to:
Business Mentors, PO Box 202, Fernhurst, Haslemere, Surrey. GU27 3ZN

.....
I would like to be a: Mentor / Mentee / Both

The most convenient TIME for me to meet would be:

The most convenient PLACE for me to meet would be:

1. PERSONAL Info

.....
First name:

Last name:

Professional affiliation:

Home e-mail address:

Date of birth:

2. BUSINESS Info

.....
Company/Organisation name:

Job title:

Office email address:

Office phone no:



Please mark the level of competency that best describes your current role:

Level 1. Senior

Level 2. Manager

Level 3. Practitioner

Level 4. Support

(Please delete as applicable)

4. Please list the total number of years experience you have (in any business role), and where/with whom.

5. Describe below, in your own words, what you hope to gain from (and bring to) the mentoring relationship.

a) What are your SHORT-TERM aims for this mentoring relationship?

b) And what are your LONG-TERM objectives for it?

c) What qualities / qualifications / experience do you hope for in your mentoring partner?



d) And what qualities / qualifications / experience do you bring?

e) If you have any special areas of interest in personal or professional development please give a brief summary here:

6. Please summarise briefly your current job / work responsibilities and recent work history: