



**Mentee Application Form**

**Name**

**Email**

**Phone Number**

**Job Title**

**Job Level**

**Employer Name**

**Industry Sector**

**Description of work experience**

**Highlight areas where you would like to improve knowledge and expertise (Tick box for selection. Multiple allowed)**

Tick Box			
Self management & accountability	<input type="checkbox"/>	Leadership skills	<input type="checkbox"/>
Influencing	<input type="checkbox"/>	Motivation	<input type="checkbox"/>
Working effectively with others	<input type="checkbox"/>	Networking skills	<input type="checkbox"/>
Team management	<input type="checkbox"/>	Strategic thinking	<input type="checkbox"/>
Career progression	<input type="checkbox"/>	Handling conflict	<input type="checkbox"/>
Managing up in your organisation	<input type="checkbox"/>		<input type="checkbox"/>

**Highlight specific goals for mentoring (Tick box for selection. Multiple allowed)**

Tick Box			
Career advice	<input type="checkbox"/>	Study skills	<input type="checkbox"/>
Communication skills	<input type="checkbox"/>	Team working	<input type="checkbox"/>
CV building	<input type="checkbox"/>	Time management	<input type="checkbox"/>
Enterprise skills	<input type="checkbox"/>	Financial planning	<input type="checkbox"/>
Interviewing	<input type="checkbox"/>	Leadership	<input type="checkbox"/>
Job search	<input type="checkbox"/>	Managing change	<input type="checkbox"/>
Presentation skills	<input type="checkbox"/>	Negotiation	<input type="checkbox"/>
Self confidence	<input type="checkbox"/>	Project management	<input type="checkbox"/>

**What do you want to achieve from your mentoring**