



## MENTOR EXPRESSION OF INTEREST

**FULL NAME:**

**GENDER:**

MALE

FEMALE

UNSPECIFIED

**MOBILE:**

**EMAIL:**

**PROGRAM YOU WOULD YOU LIKE TO MENTOR FOR:**

L2P

MATES

**CURRENT SITUATION:**

RETIRED

EMPLOYED (FULL TIME)

EMPLOYED (PART TIME/CASUAL)

LOOKING FOR WORK

OTHER (PLEASE SPECIFY)

**HOW DID YOU HEAR ABOUT OUR MENTOR PROGRAMS?**

**WHY DO YOU WANT TO BECOME A MENTOR?**

**REFEREES** (Please provide details of two referees we can contact for character references)

**REFEREE ONE**

**NAME:**

**PHONE:**

**ADDRESS:**

**RELATIONSHIP TO APPLICANT:**

**LENGTH OF TIME KNOWN:**

## REFEREE TWO

NAME:  PHONE:   
ADDRESS:   
RELATIONSHIP TO APPLICANT:   
LENGTH OF TIME KNOWN:

## CURRENT WORK DETAILS (IF APPLICABLE)

ORGANISATION NAME:   
POSITION HELD:   
ADDRESS:   
CONTACT PHONE:

## WORK EXPERIENCE (Please list any previous relevant work experience.)

NAME COMPANY/ ORGANISATION	POSITION HELD/ YEAR	EMPLOYMENT/ INVOLVEMENT
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

## COMMUNITY INVOLVEMENT/ LEADERSHIP EXPERIENCE

(Please list any courses or experience you have that may enhance your role as a mentor, eg. scout/guides leader, teacher's aide, sport coach.)

TYPE OF EXPERIENCE	YEAR/S
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

SIGNED:  DATE:  /  /