



Mentee Application



If you would like to participate as a Chilliwack School District 33 Mentee, please fill out the following application form.

Name: _____

School: _____ E-mail: _____

EA Elementary

EA Middle

EA Secondary

Indigenous EA

CYCW

Clerical

Number of years' service working in School District 33: _____

Mentee Criteria

- Open and willing to learn
- Eager, Professional, Respectful, Confidential

What are you looking for in a Mentor?

What do you hope to gain from a mentorship partnership?

Is there someone particular in our organization that you would like to be mentored by? Please state the name of that individual below.

Date: _____

Signature: _____