Mentorship Application

If you would like to participate as a Chilliwack School District 33 Mentor, 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: _____

Mentor Requirements

- Two-year commitment to serve as a mentor
- 3-5 years' experience as a permanent employee
- Commitment to extra hours for training after your normal workday
- Commitment to working on Professional Development days

Mentor Criteria

- Professional, Flexible, Confidential, Respectful, Experienced
- Ability to Coach, Collaborate, and Consult

Please list your experience within School District 33?

_____

_____

_____

What are you hoping to get out of this experience?

_____

_____

_____

Please indicate who is supporting your application.

☐ Principal ☐ Vice-Principal ☐ Resource Teacher ☐ Management

Name: _____ Signature: _____

I acknowledge that I have read the above information and would like to be considered as a Mentor.

Date: _____ Signature: _____

Note: I understand that my role as a Mentee will require no overtime as per the Collective Agreement between School District 33 and C.U.P.E. 411, page 39.