



Mentorship Application Form

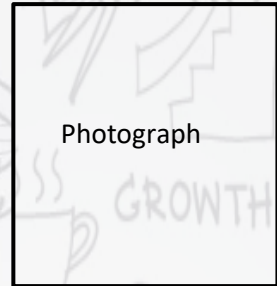
Personal Details

Name _____

Institute _____

Institute Address _____ Email _____

Institute Phone _____ Cell _____



Please indicate learning goals you would have for this mentoring relationship

1. _____
2. _____
3. _____

Are you willing to commit 2-4 hours every week at least one year? Yes No

Is your Institution board behind your commitment? Yes No

Are you willing to travel to meet with mentorship and commitments? Yes No

Have you been a mentor or mentee before? Yes No

If yes, please describe your experience

Work Experience (from most recent employment, last three positions)

Institute	Position held

Educational Qualification (from most recent, last three)

Institute	Degree

Why are you interested in the program?

By completing this application form, you agree to the goals and purpose of the mentoring program. NewGen-IEDC encourages an open exchange of information and ideas between members participating in the program. However, NewGen- IEDC cannot and does not review such communication and does not guarantee or endorse the accuracy of any information exchanged between mentor and mentee. You agree that you will participate in the mentor program in a manner consistent with the start-up mission and its mandate. You further agree to completely release NewGen – IEDC and its Coordinators, from all claims, judgements demand liabilities, and actions that you may have arising out of, or in any way relating to, your participation in the mentorship program.

I agree with the above terms, conditions and goals of the mentor program.

Signature

Date