



EXPRESSION OF INTEREST – MENTEE

Thank you for your interest in the **2017 ACT IPAA Mentoring Program**. Please outline your details and interests below in order to provide the best opportunity for a quality mentoring match.

IPAA will aim to match you with a mentor who can assist you in achieving your personal objectives. Please note that there are many benefits of a productive mentoring relationship and securing a promotion should not be your primary objective. Please ensure you have reviewed the **IPAA ACT Mentoring Guidelines** before completing this expression of interest.

Name: _____

Contact details: _____

Current role and classification: _____

Current employer: _____

I would prefer to be mentored by a (if no preference, leave blank):

- | | |
|--|--|
| <input type="checkbox"/> Young professional (36 years or under) | <input type="checkbox"/> Middle manager |
| <input type="checkbox"/> APS public servant | <input type="checkbox"/> ACT Government public servant |
| <input type="checkbox"/> IPAA member outside the public service | |
| <input type="checkbox"/> Senior Executive Service including SES who have moved to other endeavours | |
| <input type="checkbox"/> A woman or member of other diversity group if available (please be specific): _____ | |
| <input type="checkbox"/> Specific employer (list): _____ | |

I would like prefer a mentor with experience in the following area (if no preference, leave blank):

- | | |
|---|---|
| <input type="checkbox"/> Generalist | <input type="checkbox"/> Service Delivery |
| <input type="checkbox"/> Program and Project Management | <input type="checkbox"/> Policy |
| <input type="checkbox"/> Regulatory Functions | <input type="checkbox"/> |
| <input type="checkbox"/> Specialist (please be specific about preferred areas): _____ | |
| <input type="checkbox"/> Professional Technical Functions _____ | |

As a mentee I am looking for:

- Insight into working in my current role
- Being a more effective manager
- Being a more effective leader
- Preparing for work transitions
- Balancing home, parenting, education, career and extracurricular activities
- Working effectively work with senior staff and/or minister's offices
- Information about industry trends and technical development (please list): _____
- Other: _____

Is there anything we need to know to create a strong effective mentoring match for you?

Please note while IPAA ACT will do its best, it may be beyond our ability to match you exactly with your preferences.

Mentoring agreement

By submitting an expression of interest to be a mentee I acknowledge and accept the following:

1. I have read and understood the mentoring program privacy statement
2. I have read and understood the mentoring program guidelines
3. I understand IPAA ACT can take no responsibility for any advice or information exchanged between myself and a mentee or a mentor
4. My name, preferred contact details and employment details will be made available to my mentee or mentor as a part of this program
5. I will discuss and complete a mentoring agreement with my mentor/mentee to help ensure clarity and shared expectations
6. I will treat in strictest confidence all information and matters discussed in a mentoring relationship with a mentee or mentor
7. I will provide feedback as requested to enable effective evaluation of the IPAA ACT mentoring program

Signature

Date