

CSEP Mentoring Programme 2005 / 06
Declaration of Interest Form

I wish to participate in Croydon Supplementary Project's Mentoring Programme, by registering my self to become a trained Mentor.

Personal Details		
Title:	First Name:	
Surname		
Address:		
Telephone:	Work:	Home:
Email address:		
Date of Birth:	Marital Status:	Gender: M F
Professional details		
Occupation:		
Qualifications:		
Aims and ambitions		
Short term goals:		
Long term goals:		

Skills and Experience		
Voluntary activities:		
Strengths (e.g. Good at math, excellent motivator):		
Weaknesses (e.g. Spelling, filling forms, have to travel at short notice):		
Interests/Hobbies:		
Mentoring		
Why do you want to be a mentor?		
Availability (days and times):	Mon	AM /PM Time :from ___ to ___
	Tue	AM /PM Time :from ___ to ___
	Wed	AM /PM Time :from ___ to ___
	Thur	AM /PM Time :from ___ to ___
	Fri	AM /PM Time :from ___ to ___
	Sat	AM /PM Time :from ___ to ___
Other Useful Information		
Special skills:		
Other details:		
CSEP Data Protection statement:		
The information you have supplied on this application form may be processed by computer, or may form the basis of manual records.		
This data will be used to produce anonymous statistics in connection with Equal Opportunities and recruitment monitoring. Please be assured of confidentiality of the information supplied		
Signature:		Date:
(Please attach a recent CV with this form)		
For office use only		
Date Received:	Action Taken:	Entered in Database:
Received By	Application sent: Y N	Y N
	Date: Sent By:	
CV attached: Y N	Application Received: Y N	Candidate Number:
Comments:		