

Mentee Application

Date of application: _____

Name: _____ E-mail: _____

School (if relevant): _____ Current assignment: _____

Phone contact: _____

Please check if you are applying as a second year mentee participant

In point form:

Summarize the reasons why you would want to work with a mentor within our District:

What areas of teaching and learning would you most want assistance with this year?

What strengths can you bring to building an effective mentoring relationship?

**What experiences have you had with professional collaborations?
(Examples: previous mentoring experiences, learning teams, learning groups, inquiry projects)**

If you choose, provide the name and school of two possible mentors you would like to work with:

1. Name: _____ School: _____

2. Name: _____ School: _____

How will the mentor/mentee relationship look for me over the next year of teaching?

For OSTU Mentorship Program	For Early Learning and Literacy Program (K-2) with Kirsten Odian (limited to 3 applicants)
<ul style="list-style-type: none"> • Each mentee-mentor pair will have 4 release days to meet and collaborate (this can be designed by the partnership to best meet the learning goals of the mentee) • Each mentee will have one and one-half days of Professional Development on designated PD days (whether the partnership chooses to use other PD days for this process, will be up to them) 	<ul style="list-style-type: none"> • Each mentee will be required to attend 2-30 minute sessions outside of instructional time • Each mentee will receive 3-half-days of release time (this will be designed by the mentee and Kirsten to best meet the learning goals of the mentee) • Possible half-day professional development on a designated PD day