



**YMCA of Three Rivers
Immigrant & Employment Services
Mentor Application Form**

First Name: _____ Last Name: _____ Gender: _____

Date of Birth: ____/____/____ (month/day/year)

Main E-Mail: _____ Secondary E-Mail: _____

Highest Level of Education: _____

Your Home Address

Home Address: _____

City: _____

Postal Code: _____

Home Phone Number: _____

Employment Information

Employer: _____

Work Phone Number: _____

Work Address: _____

City: _____

Postal Code: _____

Job title: _____

Short Description of Your Duties:

How long have you been working in Canada?

- Between 3-5 years
- Between 5-10 years
- Over 10 years

About you as a mentor

Do you have any volunteer experience working with newcomers?

- No
- Yes (please specify)

Do you have 1-2 hours per week for 4-6 months to meet with an internationally trained professional?

- Yes
- No

In which of the following ways you can best help a mentee?

- Helping him/her understand Canadian workplace culture
- Identifying skills required by market demand
- Improving professional terminology
- Mastering self-marketing techniques and confidence building
- Selecting technical skills upgrading programs and resources
- Identifying publications and workshops on recent developments in their field
- Establishing professional networks
- Gathering information on local industries and potential employers
- Identifying and seizing employment or job training opportunities
- Supporting and encouraging efforts to become professionally established
- Others (please specify)

According to the privacy policy at your workplace, are you able to meet your match at work?

- Yes
- No
- To be determined

What are your interests and hobbies?

How did you hear about us?

- YMCA Staff
- Advertising
- Word of mouth
- Other (please specify) _____

References and Criminal Reference Check

Please provide us with two references, preferably from your employer or employment related.

Reference 1

Name: _____ Telephone Number: _____

Email: _____ Relationship: _____

Reference 2

Name: _____ Telephone Number: _____

Email: _____ Relationship: _____

Reference 3

Name: _____ Telephone Number: _____

Email: _____ Relationship: _____

Criminal Reference Check

As of January 1, 1998 the YMCA of Three Rivers has required all new volunteers to undergo a criminal reference check. Are you willing to provide a criminal reference check?

Yes

No

I authorize the release of the above information to the YMCA's Mentorship Program for the purpose of making an appropriate match. I give consent to share the information with the YMCA's Immigrant & Employment Services programs.

Signature: _____ Date: _____

YMCA Commitment to Privacy Act

The YMCA of Three Rivers wants to protect personal information by following responsible information handling practices and the government's privacy laws.

We collect and use personal information for the following reasons: meet clients' needs; ensure the safety of our participants, staff and guests; statistics; give clients information about the YMCA program in which they are registered; refer clients to internal and external programs and services that they have requested; meet the requirements of the government and regulatory boards.

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