



**ABMVSS MENTOR PROGRAM 2018**



Proudly sponsored by



**MENTOR PROFILE FORM – 2018**

PROFILE DETAILS

Name .....Classification .....Time Fraction.....

Current school/address/region .....

..... Current enrolment.....

Years in Schools ..... Years as Business Manager (if applicable).....

School phone number .....Mobile.....

Email address .....

Recent leadership professional learning activities undertaken:

1. ....

Name of organisation/facilitator.....

2. ....

Name of organisation/facilitator.....

3. ....

Name of organisation/facilitator.....

Interested applicants should be at the level of Business Manager and have the following characteristics:

1. Willingness to commit to the program
2. Strong interpersonal skills
3. Significant responsibility in their role
4. Technical Leadership competency
5. Personal strength
6. Proven capacity to share knowledge

**Please complete the following - using dot points**

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What interests you/excites you about this program?

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Please outline any relevant experience you have as a mentor:

If you haven't relevant experience as a mentor, please describe what benefits you hope to achieve by working in a mentor partnership:

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Outline your ability to develop leadership capacity in others and include the particular areas in which you would like to improve your own leadership competencies and knowledge

What are your expectations or concerns (if you have any):

	Expectations	Concerns
1.	The Mentor Program	
2.	Your Mentor Partnership	
3.	Yourself	

Please attach

- 1.  The completed mentor profile form
- 2.  Current (no more than 2 page) CV to support your application
- 3.  Principal's endorsement

PRINCIPAL'S SUPPORTING STATEMENT can be emailed separately to:  
Stace Kerr – [kerr.stace.l@edumail.vic.gov.au](mailto:kerr.stace.l@edumail.vic.gov.au)

Signed: .....Date.....

Denise Sadler | President | Association of Business Managers in Victorian State Schools (ABMVSS)  
PO Box 651, Altona, Victoria 3018  
p: 9398 4998 | f: 9398 2576 | m: 0409 951 491

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Closing Date for applications: **Friday 23rd February 2018 to** [kerr.stace.l@edumail.vic.gov.au](mailto:kerr.stace.l@edumail.vic.gov.au)

**ABMVSS MENTOR PROGRAM**  
**PRINCIPAL'S SUPPORTING STATEMENT**

**To the Principal:**

Thank you for supporting this ABMVSS Mentor Program application.

By endorsing this application you acknowledge that the applicant is a suitable candidate to participate in the Mentor Program. You support the commitment for this applicant to attend the four program professional learning workshop days, away from school (spread throughout the year); undertake a school visit with their mentor/mentee as well as additional time to build a one to one relationship with his/her mentor partnership.

Principal's supporting statement - to be emailed separately to: Stace Kerr (details below)

This section should be completed by your Principal who is familiar with your role and can provide a detailed perspective on your capabilities, achievements and potential in the context of the selection criteria.

I ..... (Principal) have read the criteria for the

ABMVSS Mentor Program and provide the following confidential statement in respect to

..... (Applicants full name)

Principal's statement

Principal's signature .....Date .....

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