



ASBOA Mentorship Program Mentor Application Form

Date: _____

Name: _____

Identify any specific area(s) that you feel you have additional expertise in (over and above your regular position) I.E) you live and breathe accounting, negotiating , FOIPP, Corporate issues, etc.:

Have you attended an ASBOA Mentor Training session (or other Mentor Training)?

Do you attend ASBOA Zone Meetings?

Do you participate in ASBOA Zone activities?

Do you attend the ASBOA Annual Conference?

Are you a member of ASBOA committees? If so, which ones?

Why are you interested in participating in the Mentorship Program?

Please provide some details about your personal interests, such as your hobbies, favourite sports team, past-times, recreational activities etc. This will help us find the best match for you in our mentorship program.

Please send a photograph – this will help your protégé to recognize you.

Please Note: Mentors should be aware that mentor and protégé relationships are based on a variety factors such as: role, geographic location and the number of interested applicants. It may take some time until the appropriate protégé is available.

Submit your application to:

Association of School Business Officials of Alberta
#1200, 9925 – 109 Street
Edmonton, Alberta Canada T5K 2J8
Fax: (780) 482-5659
Email: info@asboa.ab.ca