**Mentor Bio - 2025**

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| **Personal Details**  |
| Mentor Name:  |  |
| Preferred Contact Number: |  |
| Preferred Contact Email: |  |
| **About You**  |  |
| Briefly describe your current profession/employed role. Or Briefly describe your business and your role within it.Please note your length of career, seniority, business maturity and past mentoring experience. |  |
| **Career or Business Stage** **Please highlight what is most applicable to you.** | **Professional:**Early Stage Mid Stage Senior Returner Pre-retirement**I am a business owner:**Start-up / idea stage early-stage trading growth  |
| **Main Mentoring Focus** **Please highlight one/ two areas that you can offer support with.** | **Career Development** Developing in a current role or seeking a new role | **Business Development**Start up or developing an existing business |
| **Priority Areas of Mentoring**  | **Highlight all the areas that you might support another with:**  |
| Mentors, please highlight as many areas as possible. |

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| **Building Networks** **Leading & Managing****Managing Relationships****Presenting & Public speaking****Personal Profile & Visibility****Career Planning**  | **Interviews & Pitches** **Influencing Others****Promoting a Business** **Strategy & Business Planning****Confidence****Resilience** |

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| I understand I am committing to a 9-12 month mentoring relationship which may require flexible virtual meeting times using video calling technology. I will keep in touch with my mentee or inform the organisers if my circumstances change or I am not in a position to continue with the mentoring relationship.  |
| Signature:  | Date:  |

Please expand boxes, should you wish and return completed bio to: **info@centreoflearningni.com**