



## **WIN on-line: Women In ActioN**



## **MENTOR APPLICATION FORM**





### **PROJECT CONSORTIUM**



### **FINLAND**

YSAO - Ylä-Savo Municipal Federation of Education https://www.ysao.fi/In-English



#### **ITALY**

APID IMPRENDITORIALITA DONNA

http://www.apid.to.it



### **SPAIN**

Errotu Taldea S.L.P

https://www.errotu.com/



### **CYPRUS**

G.G. EUROSUCCESS CONSULTING LIMITED

https://www.eurosc.eu/



### **LITHUANIA**

LSMPS - Lietuvos svietimo profesine sajunga (LESTU)

https://www.svietimoprofsajunga.lt/



### **GREECE**

p-conculting.gr - C.M. SKOULIDI & SIA E.E.

https://www.p-consulting.gr/



### **GREECE**

Patras Women Union

https://egypa.org/el/





# **Mentor Application Form**

Name and Surname*:
Email:
Phone number:
Address:
❖ If relevant,
Name of the Business:
Place of the Business:
Webpage of the Business:
Founding year of the Business:
*Together with the application form, please attach your CV.
1. What raised your interest in becoming a mentor? What is your motivation?
Please justify your answer in 4-5 sentences!
2. What consultancy or business experience do you have (practical experience, Degrees, etc.)?
Please describe briefly the competences you attained during your experience!
3. Please mark how many years of consultancy or business experience you have.
□ 2 years
□ 2 - 4 years □ Over 4 years
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4. How could you contribute to your mentee's development?
5. What do you think you will personally gain during mentoring?
6. Have you been part of a mentoring programme in the past? Please explain briefly.
□ Yes
□ No
7. <u>If you answered yes to the previous question</u> , did you participate as mentor or mentee in that programme?
□ Mentor
□ Mentee
8. What were your experiences and main responsibilities with that other mentoring programme? Please describe them briefly.
9. In which business sectors and sub-sectors do you prefer conducting mentoring?
10. Are you committed to mentor new entrepreneurs or representatives of an enterprise in the course of 2-3 months?
You need to stay in contact with your mentees for at least once a month (for the duration of 2-3 months), have personal meetings, online consultation (e-mails, Skype, ZOOM, etc.)
□ Yes
□ No





11. Would you like to further develop or refresh your mentoring knowledge?
□ Yes
□ No
12. Further comments or remarks in regards to your participation in this Mentoring Program.
Let us know a bit more about yourself! This will help us match you with your mentee. For example, which are your personal interests, hobbies, habits or activities?
The use of mentors' personal data is exclusively for the purposes of the WIN on-line project in accordance with the General Personal Data Protection Regulation 2016/679/EU and the current national and European legal and regulatory framework for the protection of personal data.
I consent to the provision and process of personal data, based on the above statement.
Mentor (signature)