

Aboriginal eMentoring Program

MENTOR APPLICATION FORM



Program Overview

eMentoring is a four-year project funded by the Canadian Institutes of Health Research (CIHR). The aim is to develop an online mentoring program for Aboriginal youth and evaluate its effectiveness in supporting high school graduation and transition into post-secondary health science education programs. Mentoring relationships will take place between urban and rural Aboriginal youth in grades 6-12 across British Columbia. We are currently accepting Mentor applications from Aboriginal and non-Aboriginal UBC/SFU students and recent graduates. To participate as a Mentor, you need to go through a screening process.

First, please check to see if you meet the eligibility requirements:

Basic Eligibility Requirements

- Age 18 or older
- Ability to commit approximately 2 hours a week online with your Mentee for a minimum of one school year (September – June) or half a year if joining in the Winter intake (January – June). Participation will be flexible based on your schedules.
- Currently enrolled as a post-secondary student. This project is designed to encourage youth to enter health science programs. Therefore, health science students will be given priority, but all interested applicants are strongly encouraged to apply.
- Sincere desire to be personally involved in helping an Aboriginal youth achieve his or her personal, educational, and career goals
- Ability to communicate in an open and nonjudgmental manner
- Practical problem-solving skills and ability to suggest options and alternatives

Second, please fill out the application form and return to the eMentoring program (contact information at the end of form). This form is to learn more about you and your interests/skills so we can better match the interests of Mentors and Mentees.

Third, after a routine background check you will be invited for an interview if your application is selected.

Fourth, training will be provided to successful applicants using a combination of in-person and online modules.

Personal Information

Name:

(Last) (First) (Initial)

Permanent Address:

No. Street Apt. City Province Postal Code

Home Tel: (____) _____ Cell: _____

E-mail: _____

Gender: Female Male

Birth date: _____

Day / Month / Year

Do you self-identify as First Nations, Inuit, or Métis? Yes No

What is your cultural background (e.g. what nation/community/country are you from?):

Post-secondary Institution currently attending: _____

Major/Program: _____

Year of your study: _____

Years left in program: _____

References

To ensure the safety of the program participants, eMentoringBC will be checking personal references on every applicant. Please list three people who know you well and can attest to your character, skill and dependability. **One reference must be professional.**

Reference 1:

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Relationship: (check one) Family Friend Teacher Work Associate

Other: _____

Reference 2:

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Relationship: (check one) Family Friend Teacher Work Associate

Other: _____

Reference 3:

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Relationship: (check one) Family Friend Teacher Work Associate

Other: _____

Questionnaire

1. Why do you want to be a mentor with Aboriginal eMentoring BC?

2. Have you ever worked with youth? Yes No

If yes, please explain in what capacity you have worked with youth. (What was your role and was it through volunteer activities, your own children, etc.?)

3. What are your career goals?

4. What qualities do you possess that you feel would make you a suitable Mentor?

5. What would a successful mentoring relationship look like to you?

6. eMentoring has a research component that includes ongoing evaluation of the program's success. Are you comfortable being involved as a participant in this research? Yes No

Mentor Responsibilities

- A minimum commitment of one school year in order to develop and maintain a mentor relationship with 1-2 youth from grades 6 to 12
- Attend a Mentor orientation session at the beginning of the school year before “meeting” your Mentee online
- Attend ongoing Mentor training and support sessions throughout the year
- Meet with your Mentee online on a weekly basis to establish working relationship
- Part take in research surveys and other related activities as requested by the eMentoring coordinator

Mentor Agreement

I, _____ (*print full name*), am interested in becoming a mentor for eMentoringBC. I understand that this program will be conducting a background check on all volunteer applicants before being accepted into the program. Any information obtained through the background check will be used only in connection with the applicant’s participation in eMentoringBC.

I have also read over the eligibility requirements and the mentor responsibilities and understand the necessary qualifications and responsibilities for this position.

As well, if accepted as a volunteer for eMentoringBC, I agree to adhere to the Online Safety and Program Guidelines outlined by eMentoringBC.

Choose: I agree I DO NOT agree

Please mail, email, or fax your completed application to:

Attn: Nahannee-Fe Gillett

eMentoringBC Program
eHealth Strategy Office, University of British Columbia
855 West 10th Avenue
Vancouver BC V5Z 1L7
Email: nahannee-fe.g@ubc.ca
Fax: (604) 875-5083

Questions?

Call us at (604) 875-4111 ext. 69141 or email nahannee-fe.g@ubc.ca

For more information, please visit www.ementoringbc.com