

Mentoring application form – Mentors

Thank you for applying to be a mentor. Please see the mentoring guidelines for further information. https://katuka.online/transfer-of-skills-for-greater-success/. This form is confidential to Katuka Mentorship Proramme for learning and organisational development and the mentoring matching panel as designated in the mentoring programme.

Please complete this form as fully as possible. The information you provide will help us to match you with a mentee that has development/learning needs that most closely meet your experience and skills.

We charge a Registration Fee of N\$ 150 to cover administrative costs and secure your spot.

1. Personal Information:

Name and						
Surname:						
ID:						
Street			City:			
Address:						
Employer:						
Street			City:			
Address:						
Job Title:						
Occupation:		How long				
department:		current p	position:			
Cellphone:		Work Tel	elephone:			
Personal		Work Em	mail:			
email:						
Education and qualifications: Start with most recent						
Institution		Qualifica	ation			







2. Mentor Information:

Please give a brief overview of your current job, main responsibilities, and career to date.	
Please briefly state why you want to be a mentor. Please refer to strengths and skills and inc personal qualities/experience for development of others.	lude any
Nether de very have to gain from this leadership maiting?	
What do you hope to gain from this leadership position?	
lease identify your areas of expertise and knowledge.	
Areas of Expertise and Knowledge	Tick
Knowledge of Katuka and its culture	
Knowledge of/or previous experience as a mentor	
Communicating effectively	
Confidence and assertiveness	



Dealing positively with change

Improving resilience, work life balance and well being





Management or moving into a management role

Leadership or moving into a leaders	hip role					
Negotiating and influencing skills						
Networking opportunities						
Personal organisational skills and we	orkload managemer	nt (prioritising plans	ning and time			
Personal organisational skills and workload management (prioritising, planning and time management)						
Project management						
Managing external suppliers						
Problem solving						
Strategic thinking and implementation						
Career development and planning e.g. any particular professional specialism- (Medical doctor) Specific areas:						
				<u> </u>		
Please list other specific areas of k not listed above, e.g. managing pla	•	•	professional and support	roles		
Do you have any specific preferen	cas in tarms of the	narticinant vou wou	ıld like to menter? E a			
Manager, non-manager, or entrepi		•	<u> </u>	when		
matching, though it may not be po			ences into consideration t	••••		
Choose a category:						
Corporate or NGO	Professional		Entrepreneur/Business owner			
			Entrepreneur/Business owner			
Indicate career level:			Socianto Evacutivo Igual			
Low to mid-level	Mid-level to senior level		Senior to Executive level			
Any other:						
5. References: General reference (e.g., immediate head)						
i) Name:						
Address:	Tel:					
i) Name:						
Address: Tel:						
Addiess.		101.				
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3. Applicant Declaration:

The information on this form will be used by the mentoring matching group.

By signing this agreement, you will have your manager's approval to be a mentor. It is expected that you will attend a training event, adhere to the mentoring programme, actively participate in the mentoring process, and contribute to the evaluation of the programme.

- 1. Orientating training scheduled for beginning of February, in-person event (Thurs & Fri am 5 hours each)
- 2. April and August training take place in-person (3 hours training each). Dates tha

4. Rules and regulations:

- 1. Application forms should be completed by the applicant personally.
- 2. All application forms should be accompanied by certified copies of the following documents (note that the company shall accept no responsibility for original documents):

a. Certified copy of proof of nationality; b. Certified copies of qualifications

- 3. Proof of registration fee payment. (N\$ 150) (see banking details below)
- Completed application forms must be e-mailed or delivered to the following address: <u>desere@katuka.online</u> or <u>desere@economist.com.na</u> or Namibia Economist, 7 Schuster St, Windhoek.
- 5. Applicants will be advised in writing of the decision of the KMP.
- 6. The granting of participation lies within the sole discretion of KMP and their decision is final no correspondence will be entered into this regard.
- 7. All applications will be confidential and all information exchanged during the formal mentorship relationship is confidential.
- 8. Successful candidates will be expected to comply with the procedures and code of ethics of this programme. Failure to comply herewith, may result in the immediate and without prejudice withdrawal of participation.
- 9. Any decision in this regard will lie within the sole discretion of the KMP.

Please return to: Desèré Muller, Programme Director:

Initial the two staten	nents below:							
I understand that the mentor programme involves spending a minimum of one hour every month,								
via face-to-face conta	ict, email, skype, text or phone	, for the year with an ass	igned mentee.					
I understa	nd that I will be required to co	mplete a mentor prograr	nme orientation as scheduled by					
February 2025 and I during the year 2025	commit to participate and atte	nd all scheduled activities	s for the programme					
	eclare that the information cor se information invalidates this		e and correct and I also					
Signed	on this	day of	2024.					
Signature of applican	t.							
			*Banking details: Namibia					
Thank you for compl	Businesswomen, Standar							

Email: desere@katuka.online or desere@economist.com.na or

Deliver to: Namibia Economist, 7 Schuster Street, Windhoek



Businesswomen, Standard Bank Branch Ausspannplatz: 08267200 Account: 241666007

Deference Full name

Reference: Full name

