

Mentoring



Interest Form

Thank you for your interest in the Enterprise 4 Education (E4E) mentoring programme.
Please complete the below information and return to the E4E team. Thank you.

Surname:	
Forename:	
Company:	
Email Address:	
How often you can attend a mentoring session? (If other please state)	Weekly Fortnightly Monthly
How soon could you begin mentoring? (Please state your availability)	
Are you happy to have a Disclosure and Barring Service check? (this is required for 1-2-1 mentoring)	YES / NO
Please provide us with an address to send your DBS Form to:	
Are you interested in group mentoring? (DBS check not required)	YES / NO
Do you have any preferences? Please provide details:	
Previous experience and information:	

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