



OASFAA Mentoring Program

Mentoring Partner Application

*"The greatest good you can do for another is not just to share your riches,
but to reveal to him his own."*

~ Benjamin Disraeli

Mentoring Partners are individuals interested in connecting with a Mentor who will help in the Partner's professional development. Participants in this program are asked to make a two-year commitment. The program is structured to include a Mentoring Year and a Volunteering Year.

During the **Mentoring Year**, Mentoring Partners will be identified and assigned one or more Mentors. Mentoring activities will include both group training and on-on-one mentoring.

During the **Volunteering Year**, Mentoring Partners will be expected to serve as OASFAA volunteers in some capacity.

Mentoring pairs and circles will be established through a combination of applications and outreach.

Mentoring Partner Expectations:

- Individuals who will add to the mentoring program and the association's leadership through diversity of experience and perspective.
- Commitment and openness to being mentored and to participation in professional development activities.
- Ability to make the time commitment, with full support from their direct supervisor and institution.

Applicants must be current members of OASFAA and have the full support of their direct supervisor and employer/institution. Individuals may nominate themselves, and must provide evidence that the employer will allow time for participation, including monthly meetings (via teleconferencing, etc.) and attendance at the OASFAA Summer Drive-In and Annual Conference.

Mentoring Partner applications are due Monday, March 16, 2015.

Electronic Application

Email completed application and attachments (scans are acceptable) to:

susan.shogren@usafunds.org

Paper Application

Mail printouts of completed application and all attachments to:

Susan Shogren / OASFAA
15410 NW Oak Hills Drive
Beaverton OR 97006

** please type or print **

I. Personal Data

Name: _____

Institution: _____

Occupation or job title: _____

Business Address: _____

City, State, Zip: _____

Business Phone: _____ Business e-mail: _____

Cell Phone: _____ Years in financial aid: _____

Home Phone: _____ Years in OASFAA: _____

Do you require any accommodation to be able to participate in this program?

II. Leadership Information

This section of the application is completed by attaching no more than two 8-½" X 11" type-written pages. Please answer all questions in the order given, numbering each response. Use as much space for each question as needed, but do not exceed the total of two pages. Please put your name at the top of each page. Please do not submit a standard resume.

- 1) **Interest.** What are your expectations of the OASFAA Mentoring Program? Please explain why you want to be selected as a Mentoring Partner for this program and describe your level of interest in being mentored.
- 2) **Employment.** Briefly describe your current job, including your responsibilities. What are your professional aspirations?

III. Commitment

A. Employer. This candidate has my full support to participate as a mentor in the OASFAA Mentoring Program. I am aware of the time commitment involved in his/her effective participation and I agree to support him/her in work release time and with financial resources.

Institution Name: _____

Supervisor Title: _____

Supervisor Signature: _____ Date _____

B. Applicant. I understand the goals and commitments expected of me as a participant in the OASFAA Mentoring Program. If selected, I will devote the required time and I authorize OASFAA to share publicly photographs and news items related to my participation in the OASFAA Mentoring Program.

Applicant's Signature: _____ Date _____