**IIA NZ Mentoring Program**

**Application Form**

**Name:**

**Address:**

**Phone number: Email:**

**Organisation:**

**Job Title:**

**Number of years in Internal Audit profession:**

**Qualifications/certifications:**

**IIA NZ Membership ID:**

**Interest:** (*tick the relevant box*)

**🞎 I want to be a Mentor 🞎 I want to be a Mentee**

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| **Please explain briefly what you would like to get out of the program** |
| *Consider what outcomes you would like to achieve (e.g. career development, gain experience or other insights).* |

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| **Mentor - What qualities do you have that will make you a good Mentor?**  **Mentee - What qualities are you looking for in a Mentor?** |
| *Consider what would be most beneficial for what you want to achieve through the program (e.g. specific experience, skillsets, values).* |

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| **Mentor - What skills and experience do you have that will benefit a Mentee?**  **Mentee - What areas would you specifically like support in?** |
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| **Is there anything else you would like to share that will assist in matching you with a Mentor/Mentee?** *(e.g. hobbies, career ambitions, work experience background).* |
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**IIA NZ's Mentor and Mentee Expectations**

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| **Mentor** | **Mentee** |
| * To apply coaching skills to support the Mentee to generate their own solutions. * To share experiences and suggest options. * To avoid being judgemental. * To acknowledge they don't have all the answers. * To be clear about expectations and boundaries. * To respect confidentiality. * To abide by the IIA Code of Ethics. * To see mentoring as an opportunity to learn themselves. * To be disciplined in committing to meetings scheduled with their Mentee (minimum 1- 2 hours of their time monthly). | * To be curious, organised, efficient, responsible and engaged. * To take responsibility for their career/professional goals. * To document and review goals and desired outcomes when working with a Mentor. * To take ownership for the contact time with their Mentor. * To consider how to maximise time spent with their Mentor and prepare in advance of their meetings. * To respect the views and insights shared by their Mentor and confidentiality. * To abide by the IIA Code of Ethics. * To be proactive in completing actions in between meetings. * To be respectful of their Mentor's time and commit to each meeting (minimum 1 - 2 hours of their time monthly). |

I understand and agree to the expectations of the IIA NZ Mentoring Program.

**Name:**

**Signature: Date:**

**Please provide two References (Mentors only). *These can be either character or work references.***

**Name:**

**Organisation:**

**Relationship to you:**

**Phone number:**

**Email:**

**Name:**

**Organisation:**

**Relationship to you:**

**Phone number:**

**Email:**

**Manager endorsement for your participation in the program (Mentees only)**

**Name:**

**Title:**

**Organisation:**

**Signature: Date:**

*Please accompany this application with your CV (optional).*

*Please email your application to admin@iianz.org.nz*