

**FORT GREGG-ADAMS MENTORSHIP PROGRAM APPLICATION
FOR MENTOR AND MENTEE**

Name:	Current Job Title/Career Program/Job Series and Pay Plan/Pay Grade:	Installation/Region and Organization/Office Address and office symbol:
Phone and E-mail Address:	Total Years of Federal Service:	Highest Level of Civilian Education System (CES) completed:
Highest Civilian Degree Completed and Major Field of Study:	Supervisors Name, E-mail, Phone:	
Have you ever been a mentor/mentee before: ___Yes ___No		
What do you hope to gain from participation in the Fort Gregg-Adams Mentorship Program (either as a Mentor or Mentee) and explain why you are a good candidate?		
MENTEES: What are your long-term and short-term goals and objectives and how do you plan to achieve your goals? How do you think a mentor could help you achieve your career goals?		
MENTORS: What special knowledge, skills, and experiences are you willing to share? And how many Mentees are you willing to guide?		
What do you feel are avenues to achieve your goals? (i.e. additional education, training, developmental assignments) and how do you feel being a part of this program could aide in achieving your goals?		
In the past five years, what have you done on your own time for self-development?		
What do you consider your work-related strengths? Where do you need help (mentees)?		

What do you like most about your current job?
What do you like least (mentees)?

Additional Comments:

I request consideration for the Fort Gregg-Adams Mentoring Program as a:

Mentor Mentee

I understand participation is voluntary, and the length of time commitment initially is 6 months but may be extended by mutual agreement. I also understand I may withdraw at any time by submitting a written request.

MENTORS: I agree to share my experiences and provide advice and guidance with a goal of building up and developing our new leaders, adding to the mentorship culture at Fort Gregg-Adams. Among other things, I agree to assist the mentors connected to me to create achievable goals and hold them accountable while assisting in meeting the goals they create.

MENTEES: I realize that participation is not a guarantee of training, assignments, or promotion. Any recommended formal training is subject to applicable regulations, supervisory approval, and availability of funds. I agree to set realistic and clear goals, making a firm commitment to this program.

ALL:

I understand completion of this program may require the commitment of personal time.

I agree to communicate and meet with my mentor/mentee with the concurrence of my supervisor. I will receive approval from leadership prior to conducting any event or activity with the Fort Gregg-Adams Mentorship Program.

I understand I must attend the mentoring training and program kickoff and that I will be expected to complete all program requirements.

I agree to provide open and honest feedback to continue to better the Fort Gregg-Adams Mentorship Program in order to push forward with a sustainable program for all interested in the mentorship culture.

Applicant Signature/Date _____

I verify that the above individual is authorized to serve either as a mentor or mentee in F-GAMP.

Supervisor Signature/Date _____

NOTES: _____
