

Please send this completed form to Camille Chateauneuf, Communications Coordinator at cchateauneuf@aqdfl.ca

MENTOR DEVELOPMENT SHEET

1. IDENTIFICATION Name: First name: PROFESSIONAL DEVELOPMENT Briefly describe your career path (positions, responsibilities, projects, companies): 2. FIELDS OF EXPERTISE Please indicate your different fields of competence and expertise. **MY FIELDS OF EXPERTISE**

2. Str	engths and personal qualities	
Indicate b	elow what your main strengths and personal qualities are:	
	JR GOALS	
indicate b	elow what are your objectives for the mentoring program	
	YOUR OBJECTIVES OF PARTICIPATION IN THIS PROGRAM	

3. HAVE YOU EVER BEEN A MENTOR IN THE PAST?
Yes
No
4. AVAILABILITY AND PROFESSIONAL CONSTRAINTS
Please indicate below your availability and your professional constraints
5. WHAT IS YOUR PREFERRED LANGUAGE?
French
English
Other
Thank you for your interest in the QPMA's mentorship program and for your involvement
Please forward this completed form to Camille Chateauneuf, Communications Coordinator at cchateauneuf@aqdfl.ca
We will follow up with you in the next 2 weeks.