

NALS OF GREATER KALAMAZOO MENTORING PROGRAM OUTLINE

Mission:

NALS Mentor Program is dedicated to creating an environment for growth and development of the newer NALS members in becoming successful in providing services, resources, and other support needed to confide with his or her major goal or career aspirations.

Goals/Purpose:

- One-on-one mentoring;
- To provide support to members and develop relationships and networks;
- To provide an additional point of contact for newer NALS members; and
- To help navigate what NALS has to offer;
 - Education
 - Givebacks
 - Networking and
 - Certification

Objective:

- Mentors/Mentees will meet (in person or over the phone) at least once a month for one year.
- Quarterly checkups with Program Coordinator.
- Instill the four core NALS values: Engage, Inspire, Enhance, and Promote.

Program Guidelines:

- The pairs will meet at least once a month.
- Mentor/Mentees relationship will last at least one year...but hopefully a lifetime.
- Mentors/Mentees will meet at a designated area of their choosing.

Requirements:

Mentors:

- Must be an active member of NALS of Greater Kalamazoo.
- Must actively participate and support chapter events.
- Must be willing to commit to the mentor program for a specified period of time.
- Must complete the mentor application.

Mentees:

- Must be an active newer member of NALS of Greater Kalamazoo (less than three-years).
- Must actively participate and support chapter events.
- Must complete a mentee application.

Contact Information:

- Program Coordinator – Cathy A. Zackery, CLP
- Mentors and Mentees

MENTOR GUIDELINES

Roles and Responsibilities:

- Mentor must fill out the information sheet.
- Mentor must make initial contact with Mentee within one week of assignment.
- Mentor must communicate with Mentee at least once a month.
- Mentor and Mentee together must complete at least two of the suggested activities.
 - Lunch/dinner
 - Attend a general membership meeting/or State meeting
 - Attend a NALS Social event or giveback
 - Mentor reviews Mentee's resume and offers suggestions for improvement
- Mentors and Mentees must complete the session recording sheet.
- Go through the NALS of Greater Kalamazoo Bylaws and Standing Rules.

Guidelines for Meetings:

Phone Contact:

- Mentor calls Mentee to arrange initial meeting and discuss scheduling.
- Mentee calls mentor to arrange joint attendance at chapter meetings.

Meetings:

- Discuss your current NALS roles & responsibilities.
- Explain why you joined NALS.
- Share your feelings on the importance of networking and continued professional development and how to network with other NALS members through the www.NALS.org site.

Final Meeting:

- Discussion of the Mentor experience.
- Discussion of the value of additional meetings or contact.
- Discussion of:
 - Talents
 - Volunteer Opportunities
 - Traits
 - Strength
 - Weaknesses

MENTEE GUIDELINES

Roles and Responsibilities:

- Mentee must fill out the information sheet.
- Mentee must communicate with Mentors at least once a month.
- Mentor and Mentee together must complete at least two of the suggested activities.
 - Lunch/dinner
 - Attend a general membership meeting/or State meeting
 - Attend a NALS Social event or giveback
 - Mentor reviews Mentee's resume and offers suggestions for improvement.
- Mentors and Mentees must complete the session recording sheet.
- Go through the NALS of Greater Kalamazoo Bylaws and Standing Rules.

Guidelines for Meetings:

Phone Contact:

- Mentor calls Mentee to arrange initial meeting and discuss scheduling.
- Mentee calls Mentor to arrange joint attendance at chapter meetings.

Meetings:

- *Discuss what NALS roles & responsibilities you would be interested in.*
- *Explain why you joined NALS and what you would like to gain from your membership.*
- *Share your feelings on the importance of networking and continued professional development.*

Final Meeting:

- Discussion of the Mentee experience.
- Discussion of the value of additional meetings or contact.
- Complete the Mentor Evaluation Form.
- Discussion of:
 - Talents
 - Volunteer Opportunities
 - Traits
 - Strength
 - Weaknesses

Mentor Application

SECTION ONE: GENERAL INFORMATION

Name: _____

Cell Phone: _____ Work Phone: _____

E-Mail: _____

SECTION TWO: EMPLOYMENT INFORMATION

Occupation: _____

Employer Name: _____

Practice area: _____

Volunteer/Other Association:

SECTION THREE: MENTORING INFORMATION

Why do you want to be a mentor?

Do you have any previous experience volunteering, or mentoring?

What support or resources would you need to be successful as a mentor?

Signature: _____ Date: _____

Mentee Application

SECTION ONE: GENERAL INFORMATION

Name: _____

Cell Phone: _____ Work Phone: _____

E-Mail: _____

SECTION TWO: EMPLOYMENT/SCHOOL INFORMATION

Occupation/Major: _____

Employer/School Name: _____

Volunteer/Other Association:

SECTION THREE: MENTORING INFORMATION

Why do you want to a mentee?

What do you want to get out of this program?

What support or resources do you need the most?

Signature: _____ Date: _____

MENTOR & MENTEE SESSION RECORDING SHEET

PRIVATE AND CONFIDENTIAL

Name of Mentor: _____

Name of Mentee: _____

Number of meetings completed to date: _____

Overview: (More detailed notes can be retained by mentor and/or mentee. Please continue overleaf if required.)

Advantages within the program: (that you would be willing to share)

Opportunities within the program: (since last encounter if applicable)

Is this the FINAL Mentoring Session? YES / NO

**** MENTOR & MENTEE DATE & SIGNATURES** (Required)

Date: _____

Mentor: _____

Mentee: _____

Mentor Evaluation Form

(Completed by the Mentee)

Please provide information and insight regarding the NALS of Greater Kalamazoo mentoring program by indicating a rating value for the following questions related to the past year's activities and the nature of the mentoring process.

Mentee's Name: _____

Mentor's Name: _____

Questions:	Strongly Disagree – 1	Disagree – 2	Agree – 3	Strongly Agree - 4
My mentor was accessible and available.				
My mentor communicated regularly with me.				
My mentor assisted me with my questions.				
My mentor demonstrated a reasonable interest/concern towards me.				
I learned at least one new advantage that NALS has to offer.				
Overall, my mentor was an asset and a benefit to me.				
I anticipate an extended future relationship.				

Mentee Signature: _____

Date: _____