



ORMDI Mentoring Program

FY

Mentor Name

Email

Position Title

Series/Grade

ORMDI Program Office

Supervisor Name

Were you rated fully successful and above on your last performance evaluation?

Why do you want to be a mentor?

List the series of positions and grades you held

Describe what you consider to be your strongest general competencies (i.e., Knowledge, Skills, and Abilities)

Describe what you consider to be your strongest technical competency?

What do you think a mentee can learn from you?



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What are your interests or hobbies outside of work?

Do you have someone in mind who you would like to suggest as your mentee? If yes, provide his/her/their name:

I understand that I will devote approximately 1-2 hours per month over the course of twelve months to the Mentorship Program. I will share my experience and give professional guidance and constructive feedback to the mentee(s).

Signed by:

Date Signed: