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National Conference of Bankruptcy Clerks Mentorship Program

Mentee Application

The purpose of the NCBC Mentoring Program is to pair a seasoned and experienced NCBC member (the Mentor) and a NCBC member in good standing (the Mentee) to enhance the Mentee's professional and personal development and to expose the Mentee to leadership, education and advocacy opportunities within NCBC and the judiciary. The structured portion of the Program mentoring relationship is intended to last six (6) months, but it is hoped that the informal relationship will last a lifetime.

The NCBC Mentoring Program is highly selective so you are encouraged to take your time to complete this Application fully and accurately.

Name:	Position Title:
Title of Court or Organization:	
Court Jurisdiction:	
Address 1:	
Office Phone Number:	Email:
Years of working in courts:	Years as NCBC member:
Years in court management and/or administrati	on:
Approximate number of employees working for	your court: Number of Judges:
Number of employees under your supervision a	and/or administration:
Indicate three (3) specific/measurable profession 1.	onal goals you would like to achieve during the program?
2.	

Indicate the areas of specific career interest you will be exploring during this program? For example budgeting/finance, human resources, court operations, information technology, project management and/or assistance with a specific project. Please state WHY this area or areas are of interest to you.
Indicate three (3) to five (5) of your most relevant achievements which may highlight your ability to succeed in this program. For example participation on committees or in leadership roles and/or completion of programs through the FJC, JOU, Courts Learn, MSU or other type of relevant education/training.
1.
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Please describe what you think the mentor's role should be in this mentoring relationship?
Additional comments: (This section provides you with the opportunity to share any other reasons why you think you would be a successful candidate for this program)
think you would be a successful candidate for this program)
Availability: Check all that apply.
How often would you like to communicate: weekly biweekly monthly
What days and times would you like to communicate:
Monday Tuesday Wednesday Thursday Friday
am pm am pm am pm am pm
What is your preferred method of communication: email telephone video conferencing
I have notified my immediate supervisor of my participation in the NCBC Mentoring Program (initials)

Signature	Date
Electronic Signature - By typing your name the best of your knowledge.	e you certify that the information provided is true and complete to
, ,	
To submit your application	please save or print and scan this document.
Return by en	nail to: mac@canb.uscourts.gov