**Medical Sciences Mentoring Scheme for Research Staff**

**Mentee Application Form**

Please complete the following proforma to provide information relating to your career and current role. This information will be available only to those running the Divisional Mentoring Scheme and will assist us in matching you with your mentees. The section in **blue** will be shared with your mentors once matches have been made.

|  |  |
| --- | --- |
| **Name:** |  |
| **Department:** |  |
| **Site based (JR, Old Road Campus or South Parks):** |  |
| **Job title:** |  |
| **Work tel. no:** |  |
| **E-mail address:** |  |

1. **RESEARCHERS:**

**Please attach an up-to-date CV that we can share with your mentor**

**i. Please indicate which postdoctoral position you are on:**

1st 2nd 3rd

Other (Please specify)

**ii. For how many years have you been a member of research staff or postdoc?**

**iii. How many years do you have remaining on your current employment contract?**

1. **PROFESSIONAL/ADMINISTRATIVE/TECHNICAL/RESEARCH SUPPORT STAFF:**

**Please attach an up-to-date CV that we can share with your mentor**

1. **Please indicate which role type you are in:**

Administrative Technical

Clinical Research Support Non clinical

(i.e. Research nurse) Research Support

**ii. For how many years have you been a member of staff?**

**iii. How many years do you have remaining on your current employment contract?**

1. **Please describe what you hope to gain through the mentoring scheme**

|  |
| --- |
| *You may or may not have clear ideas on what you would like to address through mentoring, but it is useful to be as aware as possible of what you’d like to achieve. Please reflect on your motivation for signing up to the scheme as well as your responses to the pre-scheme questionnaire to help you be as specific as you can in this section. Of course, you will still have the freedom for your aims to shift throughout the mentoring period.* |

1. **Please complete the brief questionnaire below.** This is to help you reflect on your priorities so that you can be clear about what you want from the scheme, and to help us match you with other mentees. We will also use the results to evaluate the impact of the mentoring scheme by comparing it with a questionnaire that we’ll send you at the end of the initial 12 month mentoring period.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree | Not applicable |
| I have a career goal |  |  |  |  |  |  |
| I have a good idea of the career options available to me |  |  |  |  |  |  |
| I have identified specific plans to achieve my career goals |  |  |  |  |  |  |
| I know in what areas I would like to develop professionally |  |  |  |  |  |  |
| I set aside time to reflect on my career and professional development |  |  |  |  |  |  |
| I know where to go for support with my personal or professional development |  |  |  |  |  |  |
| I am satisfied with my work/life balance |  |  |  |  |  |  |
| I am satisfied with my ability to manage my time effectively |  |  |  |  |  |  |
| I have the skills necessary to effectively search the medical literature |  |  |  |  |  |  |
| I can critically evaluate the medical literature |  |  |  |  |  |  |
| I know how to publish strategically |  |  |  |  |  |  |
| I have the skills necessary to write a research paper |  |  |  |  |  |  |
| I am confident applying for grants |  |  |  |  |  |  |
| I can deliver effective, engaging presentations |  |  |  |  |  |  |
| I am confident managing relationships with my colleagues |  |  |  |  |  |  |
| I am confident networking with others |  |  |  |  |  |  |
| I am confident teaching students |  |  |  |  |  |  |
| I know how to find teaching opportunities |  |  |  |  |  |  |

1. **The mentoring scheme and you**
2. **Do you have a preference for the gender of your mentor/fellow mentees?**

|  |  |
| --- | --- |
| **No preference** |  |
| **All female** |  |
| **All male** |  |

1. **Do you have a preference for the timing of your meetings?** *e.g. a preferred day of the week, mornings or evenings*

**Thank you for taking the time to complete this proforma**

**– please return it to** [**athena-swan@medsci.ox.ac.uk**](mailto:athena-swan@medsci.ox.ac.uk)

**Deadline: Wednesday 31st July 2019**