

Mentor Application Form

Thank you for your interest in the CAGP Vancouver Chapter Mentorship Program! Please complete this questionnaire to help us better pair you with one of our Learning Partners.

Once completed, please click the "Submit Form" at the end of the application.

Contact Details				
Full Name:		Phone:		
Employer:		Email: *please ched	ck off preferred contact metho	
Work Address: ——				
City:		Postal Cod	le:	
	Арр	olication		
Are you a member in g	good standing with	CAGP?		
Yes	No			
*If you are not a member Please indicate the nu	· ·	•	er of CAGP:	
3 years or less	3 -5 years	5 - 10 years	More than ten years	
Please indicate the nu Giving sector:	mber of years you	have been employe	ed in the Charity/Planned	
3 years or less	3 -5 years	5 - 10 years	More than ten years	
Please indicate how lo	ong you have been	employed with you	r present employer:	
3 years or less	3 -5 years	5 - 10 years	More than ten years	
Please indicate any pr	ofessional designa	tion(s) and if you ho	old a CFRE designation:	



	Mentor A	Application	
or non-professional a aken:	dvisors, please indic	cate what Planned Giving Courses you	have
The Original Gift	Planning Course	 Advanced Canadian Gift Plannii Symposium 	ng
BCIT Fundraising	Course	Other:	_
6. Referring to the <u>CAG</u> ou best suited to men	•	nework, please indicate in which areas	s are
Knowledge of a c governance etc.) Knowledge of Leg Knowledge of Ma	ent t Planning Vehicles harity's framework (gal Context of Gift Pl rketing & Communic	(policies and procedures, management lanning & the Charitable Sector cations ing to serve as a Mentor and whether y	
		nal advisor or gift planner:	
Do you feel best suitab undraising staff of:	le to mentor a Learr	ning Partner from an organization with	1

10 +

Not sure

3 or less

4 - 9



Mentor Application

Health & Wellness

In which industries have you worked as a Planned Giving professional?

Charity:

Animal Protection & Welfare

Community services	Health Research	
Culture & Recreation	 International Development 	
Education & Job Training	Law & Legal Support	
Environment & Conservation	Poverty Alleviation	
Family & Senior Support	Youth Services	
Professional Advisor:		
Legal Advisor	Insurance / Investment Advisor	
Accountant or Financial Planner	Trust Officer	
Other:		
3. Any Other Comments?		

**Submit button will not work in browser, please download form

SUBMIT

Thank you!

We look forward to matching you with a Learning Partner and seeing you at future CAGP events. Don't forget to subscribe to our newsletter <u>here</u>.