CAREER DEVELOPMENT MENTORING PROGRAM

INFORMATION MEETING

July 24, 2019 @ Haslet Rm. 219, Dover 10 – 1
July 26, 2019 @ Carvel Training Rm., Wilm. 1:30 – 4
CAREER DEVELOPMENT MENTORING PROGRAM

INFORMATION MEETING AGENDA

July 24, 2019: Haslet Building, Dover
July 26, 2019: Carvel Building, Wilmington

Welcome/Introductions  Michelle Potter

Curriculum Overview to Program  Michelle Potter

Uncommon Individual Foundation
Mentoring Curriculum  John Crosby and Christine Heard

Application Process/Matching Process  Michelle Potter

Registering for classes  Michelle Potter

FAQ’s  Michelle Potter

Question & Answers  All

http://www.hrm.omb.delaware.gov/employee/mentor.shtml
Forms for Career Development Mentoring Program

- **Application Forms for Mentor and Mentee**
  - To be completed after the Informational Meeting

- **Mentee Nomination Form**
  - To be completed by prospective mentee’s supervisor prior to entrance into program

- **Mentor Checklist**
  - To be completed by mentor at time of initial mentor training period

- **Mentor/Mentee Monthly Progress Reports**
  - One to be completed by both mentor and mentee monthly to document progress of mentoring partnership

- **Plan to Success**
  - To be completed by mentee and mentor to outline mentee’s strengths and weaknesses, to define goals and to develop career path for mentees

- **Evaluation Form (online)**
  - To be completed at end of program by both mentor and mentee to evaluate overall success of program and provide suggestions on how program may be improved
The Career Development Mentoring Program

Application Process

**Step 1:** Attend one of the two Information Meetings in July.

July 24, 2019 at the Haslet Building in room 219 from 10 to 1

Or

July 26, 2019 at the Carvel Building in the DHR training room from 1:30 to 4

**Step 2:**
Read through your Information packet.

**Step 3:**
Go to http://hrm.omb.delaware.gov/employee/mentor.shtml
Click on forms and fill out the following forms:

- Application (Mentee or Mentor)
- Mentee Plan for Success (Mentee only)
- Mentor Checklist & Skills Assessment (Mentor only)

**Step 4:**

*Submit the completed application packet to Michelle Potter at: michelle.potter@delaware.gov by August 12, 2019

*The Mentor/Mentee notifications are usually sent out one week after the application deadline.

Department of Human Resources
# MENTEE APPLICATION

**Instructions:** Please provide the following information to Michelle Potter, DHR

**Applications must be received by August 12, 2019**

## PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>Name:</th>
<th>PG:</th>
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<tbody>
<tr>
<td>Position:</td>
<td>Division:</td>
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<td>Department:</td>
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<td>Address:</td>
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<tr>
<th>City:</th>
<th>State:</th>
<th>ZIP Code:</th>
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<tbody>
<tr>
<td>Phone:</td>
<td>E-mail:</td>
<td>Fax:</td>
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## Educational Background

<table>
<thead>
<tr>
<th>Institution:</th>
<th>Dates Attended:</th>
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<tbody>
<tr>
<td>Degree:</td>
<td>Major:</td>
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<tr>
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<td>Dates Attended:</td>
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<tr>
<td>Degree:</td>
<td>Major:</td>
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## EMPLOYMENT INFORMATION

Please list your past 5 years of employment.

<table>
<thead>
<tr>
<th>Employer:</th>
<th>Address:</th>
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<tbody>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>Employer:</td>
<td>Address:</td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
</tbody>
</table>

**Current Job responsibilities:**

## ABOUT YOU

<table>
<thead>
<tr>
<th>What are your goals?</th>
</tr>
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</table>

Describe your strongest competencies (i.e. knowledge, skills & abilities).

<table>
<thead>
<tr>
<th>Why do you want to work with a mentor?</th>
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</table>
## MENTEE APPLICATION

Instructions: Please provide the following information to Michelle Potter, DHR

**Applications must be received by August 12, 2019**

<table>
<thead>
<tr>
<th>How much time can you realistically invest in the mentoring relationship?</th>
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<tbody>
<tr>
<td>Less than 1 hour per week</td>
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<tr>
<th>Have you ever had an assigned mentor?</th>
<th>Yes</th>
<th>No</th>
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</table>

Describe the competencies (i.e. knowledge, skills & abilities) you would like to strengthen.

**Do you have someone in mind who you would like to suggest as your mentor? If yes, list his or her name.**

**Please note that there are no guarantees you will be paired with this individual.**

What are your hobbies or interests outside of work?

Please add any additional information you would like us to consider.

Signature of applicant:  ![Signature]

Date:

**Please Return to:**
Michelle Potter, DHR
Carvel State Office Building
820 N. French Street, 10th Floor
Wilmington, DE 19801
michelle.potter@delaware.gov
Career Development Mentoring Program
MENTEE APPLICATION

Instructions: Please provide the following information to Michelle Potter, DHR
Applications must be received by August 12, 2019

For Office Use Only:
Career Development Mentoring Program

Mentee’s Supervisor Nomination Form

Name of Nominee: ________________________________________________________

Position: __________________________________________________________________

Agency/Department: __________________________________________________________________

I believe the above person deserves to be selected as a mentee because he/she meets the following criteria:

_____ Demonstrates an interest in the program

_____ Shows the desire and ability to seek new and challenging opportunities.

_____ Shows a positive work ethic.

_____ Is committed to personal growth and ready to take advantage of all learning experiences

Has the following strengths:

________________________________________________________________________

________________________________________________________________________

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Department of Human Resources
Career Development Mentoring Program

Mentee Plan For Success

Name: ________________________________        Date: ________________________

1. My strengths are: ______________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

2. My Development Opportunities are:  _______________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Action Plan:

Goal Achievement #1: _____________________________________________________
Purpose: ________________________________________________________________
Planned Date of Attainment: ________________________________________________
Actual Date of Attainment: _________________________________________________
Comment: _______________________________________________________________
________________________________________________________________________

Goal Achievement #2: ____________________________________________________
Purpose: ________________________________

Planned Date of Attainment: _____________  Actual Date of Attainment: ______________

Comment: ___________________________________________________________________

_____________________________________________________________________________
**MENTOR APPLICATION**

Instructions: Please provide the following information to Michelle Potter, DHR

**Applications must be received by August 12, 2019**

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<table>
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<tr>
<th>Educational Background</th>
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<td>Institution:</td>
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<tr>
<th>EMPLOYMENT INFORMATION</th>
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<tbody>
<tr>
<td>Please list your past 12 years of employment.</td>
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<td>Employer:</td>
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<tr>
<td>Current Job responsibilities:</td>
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<table>
<thead>
<tr>
<th>ABOUT YOU</th>
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<tbody>
<tr>
<td>What skills do you bring to the relationship?</td>
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</table>

What are your expectations as a result of a mentoring relationship?

How much time can you realistically invest in the mentoring relationship?
Career Development Mentoring Program
MENTOR APPLICATION
Instructions: Please provide the following information to Michelle Potter, DHR
Applications must be received by August 12, 2019

<table>
<thead>
<tr>
<th>Less than 1 hour per week</th>
<th>☐</th>
<th>More than 1 hour per week</th>
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What are your hobbies or interests outside of work?

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<tr>
<th>EXPERIENCE</th>
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<tr>
<td>Have you ever had a mentor?</td>
<td>Yes ☐</td>
</tr>
<tr>
<td>Have you ever been a mentor?</td>
<td>Yes ☐</td>
</tr>
</tbody>
</table>

In the space below or on a separate sheet of paper, please describe an experience in which you were able to help someone else:

Signature of applicant: ______________________ Date: __________
MENTOR APPLICATION

Instructions: Please provide the following information to Michelle Potter, DHR
Applications must be received by August 12, 2019

Please Return to:
Michelle Potter, DHR
Carvel State Office Building
820 N. French Street, 10th Floor
Wilmington, DE 19801
michelle.potter@delaware.gov

For Office Use Only:
Mentor Checklist

I meet all the following requirements:

___ I have been employed by the State for at least one year.

___ I have broad organizational knowledge and networking abilities.

___ I am committed to being a mentor for at least one year.

___ I am committed to being available to my mentee for at least an average of one hour per week.

I have the following traits:

___ I am a good listener.

___ I am able to give constructive feedback.

___ I am committed to others’ growth and development.

___ I am approachable.

___ I am open-minded and able to value different perspectives.

___ I am a role model.

___ I am encouraging.

___ I am positive and sincere.

___ I am someone who can admit mistakes and learn from them.
I am someone who gives.

I believe in continuous learning.

I have the skills to assess a situation objectively and to take the correct action.

NOTE: Not all traits have to be checked to become a mentor. You and the mentoring program coordinator will discuss this checklist once you have completed it to determine if you are suitable for the program, or if you need any special training before starting the program.

Skills Assessment

There are no right or wrong answers to this skill assessment. It is simply a guide to show what things you would be good at mentoring.

This is what I am good at:

<table>
<thead>
<tr>
<th>People</th>
<th>Data/Information Things</th>
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<tr>
<td>___ advising</td>
<td>___ accounting</td>
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<td>___ briefing</td>
<td>___ analyzing</td>
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<td>___ communicating</td>
<td>___ balancing</td>
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<td>___ consulting</td>
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<td>___ coaching</td>
<td>___ collecting</td>
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<td>___ facilitating</td>
<td>___ comparing</td>
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<td>___ following through</td>
<td>___ compiling</td>
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<td>___ giving feedback</td>
<td>___ computing</td>
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<td>___ guiding discussions</td>
<td>___ creating</td>
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<td>___ influencing</td>
<td>___ designing</td>
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<td>___ interviewing</td>
<td>___ forecasting</td>
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<td>___ managing</td>
<td>___ idea generating</td>
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<td>___ mentoring</td>
<td>___ imagining</td>
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<td>___ motivating</td>
<td>___ interviewing</td>
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<td>___ negotiating</td>
<td>___ organizing</td>
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<tr>
<td>___ persuading</td>
<td>___ planning</td>
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___ agility & speed
___ assembling
___ calibrating
___ constructing
___ cooking
___ crafting
___ growing things
___ building
___ hand & eye coordination
___ handling & packing
___ finger dexterity
___ inspecting
___ maintaining
___ maneuvering
___ manufacturing
___ molding
___ motor skills
___ operating
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My top four strengths are:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please provide any additional information you would like to consider:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Department of Human Resources
Career Development Mentoring Program

Mentor/Mentee Monthly Progress Report

For the month of ________________________________

Name: _______________________________   Agency: _______________________________

Email Address: ________________________   Phone No. ______________________________

Mentee’s Name: _______________________   Mentor’s Name: _________________________

1. How much time was spent with your mentee/mentor in the past month (face-to-face, phone, e-mail, texting)?

___________________________________________________________________________

___________________________________________________________________________

2. Do you feel the time spent with your mentee/mentor was beneficial?    Yes _____  No _____

3. Do you feel communication with your assigned mentoring partner is good? Yes ___ No _____

   Please comment: ____________________________________________________________

  ___________________________________________________________________________

  ___________________________________________________________________________

4. What are some of the things that you feel you and your mentee/mentor accomplished in the past month?

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

5. Comments/Suggestions: _______________________________________________________

  ___________________________________________________________________________

  ___________________________________________________________________________

Department of Human Resources
Due by the last day of each month to Michelle Potter, DHR
Carvel State Office Bldg., 10th Floor
820 N. French Street, 10th Floor
Wilmington, DE 19801
michelle.potter@delaware.gov

Thank you!
Frequently Asked Questions

1. What if I miss a class?
   a. The curriculum aims to ensure that Mentees in the Program develop the knowledge, skills and attributes to support them in their career goals.
   b. So all efforts should be made to attend each class. However, if that is not possible you should contact Michelle Potter to work out the details of your particular situation.

2. How do I give a testimonial?
   a. Contact Michelle Potter to arrange the details at michelle.potter@delaware.gov or call 302-577-8977.

3. How do I apply to participate as a mentor or mentee?
   a. You can find all needed information about participating in the Mentoring Program and fillable forms on our website at: www.hrm.omb.delaware.gov/employee/mentor.shtml.

4. How long is the Program?
   a. The Program is eight months; however, many mentor-mentee relationships continue past the end of the year.

5. How many classes are there?
   a. There are three workshops and eight classes for a total of eleven altogether. Most classes are a full day.

6. Do I need my supervisor’s approval?
   a. Yes, all Mentees must submit the Supervisor’s Nomination Form signed by their supervisor.
   b. Mentors are encouraged to gain the support of their supervisor as well; however, no formal documentation is required to be submitted with the application.

7. What if my relationship with my Mentor/Mentee is not working?
   a. We ask that each Mentee and Mentor submit a monthly progress report. This will help us identify any mismatches in a timely manner. We will make every attempt to assist in resolving any issues; however, if a suitable alternative arrangement cannot be made we may ask the participants to reapply the following year.

8. If I don’t attend the Information Meeting can I still apply?
   a. We encourage all potential participates to attend the Information Meeting. Being a part of a larger group is much more valuable than just getting the information via email. However, if you are unable to attend you can still apply. Contact Michelle Potter at michelle.potter@delaware.gov or call 302-577-8977.

9. What if I already had taken a class that is scheduled as part of the Mentoring Program?
   a. Email Michelle Potter which class you have taken and the date. A decision will be based on the class, when you took the class, and if the content of the class has changed.
10. What forms must I submit by the deadline?
   a. Mentees must submit the Mentee application and the Supervisor’s Nomination form signed by the supervisor.
   b. Mentors must submit the Mentor application and the Mentor Checklist and Skills Assessment form.

11. Can Causal Seasonal employees apply?
   a. At this time the Mentoring Program is for permanent state employees.