**Middle Temple Mentoring Scheme**

**Form for Mentors**

The information provided in this application form, and any information provided in respect of your membership, will be used for the purpose of considering your offer to act as a mentor only.

Please indicate if you:

|  |  |  |
| --- | --- | --- |
| * wish this form to be destroyed once you have been matched with a mentee
 | Yes | No |
| * agree to your details being shared with prospective mentees, present and future members of the Hall Committee, and present and future members of the Mentoring Committee
 | Yes | No |

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| --- |
| **BASIC DETAILS** |
| Name  |  |
| Membership Number |  |
| Year of Call |  |
| Year of Silk (if applicable) |  |
| Year practice commenced  |  |
| Year pupillage completed |  |
| Age (optional) |  |
| Contact address |  |
| Telephone |  |
| Email |  |
| Preferred method of contact |  |

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| **MENTORING REQUIREMENTS** |
| Current area(s) of specialism (Please specify if any work is publicly funded) |  |
| Current Chambers/ Employer (to avoid potential conflict) |  |
| Previous Chambers/ Employer (if applicable) (to avoid potential conflict) |  |
| Do you hold a full or part time judicial office?  | No |  |
| High Court Judge |  |
| Circuit Judge |  |
| Deputy (please specify jurisdiction) |  |
| Recorder |  |
| Tribunal Member |  |
| Other (please specify) |  |
| The following issues may help you to consider your own experience and what you might offer as a mentor. Please choose all that are appropriate. Please put any other skills in the free text box.  | Applying for silk |  |
| Applying for a full or part time judicial post |  |
| Furthering career/realising potential in some other way |  |
| Returning to work after parental leave |  |
| Returning to work after leave for any other reason including ill health |  |
| Moving Chambers/ moving employment |  |
| Networking and promotion of practice |  |
| Specific skills (please specify) |  |
| Other (please specify) |  |
| Please add any additional details which you think might assist us in matching you with a mentee including any other experiences that are underrepresented at the Bar (e.g., experience in social mobility and/ or LGBTQ+ communities)? |  |
| Please indicate whether there any particular times that might not suit for meeting with a mentee. |  |

Signed......................................... Date............................................

**Please send completed form to:**

*Mentoring@middletemple.org.uk*