

MATURE STUDENTS' CLUB MENTORING PROGRAMME

APPLICATION FORM

First Name:-----

Student ID : -----

Surname: -----

Gender: -----

Preferred Name:-----

Ethnicity: -----

Primary Faculty: -----

Secondary Faculty: -----

Have you ever been a "New Start" student? Y / No

(Tick below where applicable)

Undergraduate:

Graduate:

Current papers studying: -----

Do we have permission to view your academic record? YES / NO

(Tick below where applicable)

Year of study 2013: 1st 2nd 3rd 4th 5th Hons Masters PhD Graduate Diploma

E-mail Address: -----

Phone: -----

Mobile: -----

Briefly describe your interest in becoming a Mature Students' Club Mentor:

Briefly describe any relevant leadership involvement, or University experience applicable to the role:

Briefly describe why you would be a positive addition to the Mature Students' Club Mentoring Programme: