

## **Mentoring**

### **How to apply:**

Complete the application form and submit to Local Enterprise Office.

### **How is a mentor selected:**

Each request is handled individually with careful consideration given to match the requirements of the business to the specialised skills and knowledge of a mentor. Several mentors will be considered and the final selection shall be made by the relevant Local Enterprise Office staff member handling the application.

### **What can the mentors achieve:**

The mentors role is to listen and advise and by doing so can assist in identifying obstacles to growth of your business. In this way solutions to problems identified may be found.

The mentors' role is that of an independent advisor. The mentor will encourage you to take appropriate action by contributing informed, independent and knowledgeable advice. By doing this you shall be in a better position to make decisions.

Mentors will be good listeners, easy to relate to and have a flexible approach.

### **What your mentor cannot do:**

The mentor is precluded from becoming actively involved in the day-to-day management or assuming any executive role in the business.

Your mentor is not a consultant and although he may advise on a course of action it is not his function or role to perform these for you.

### **Meetings with your mentor:**

Your mentor will draw up with you and list of objectives and set priorities. It is best that this is accomplished as early as possible.

The timing and length of meetings shall be decided by you and the mentor. At the end of each mentoring visit you shall have set objectives to be achieved by you prior to the next meeting. You should also agree date/time of the subsequent meeting.

Be sure you know the contact details for the assigned mentors but if you have problems you may contact staff of the Enterprise Board.

### **If you require a mentor with different expertise:**

It can happen that, during your mentoring with the initially assigned mentor, you identify problems, outside of the mentors field of experience, then you may request a change of mentor.

### **Evaluation:**

The Local Enterprise Office shall seek your evaluation of the mentoring on completion.

This is required to ensure any problems highlighted may be corrected to ensure a first class service to our businesses in the future. It is also a requirement that we assess the contribution made to the future growth of your business.

**APPLICATION FOR APPOINTMENT OF MENTOR**  
(TO BE COMPLETED BY THE APPLICANT)

**SECTION ONE**

Name of Applicant: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Mobile No: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Age of promoter: \_\_\_\_\_ Over 25: ☐ Under 25: ☐  
(please tick)

Number of Employed at Present: \_\_\_\_\_

**SECTION TWO**

Describe Product / Service: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Start Up Date: \_\_\_\_\_

**SECTION THREE**

**Sales / Marketing**

List Main Customers

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly Describe Marketing of Product/Service: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Sales (per financial year – indicate period covered)**

Last Year:	€	
Current Year:	€	
Next Year (Projected):	€	

**SECTION FOUR**

**Finance**

(For start up projects or expansions)

Estimated Cost of New Fixed Asset Investment:	€	
Working Capital	€	

**Proposed Funding:**

Promoters Own Resources:	€	
Loans (please specify)	€	
Grant Assistance:	€	

**SECTION FIVE**

**The Mentoring Requirements:**

Describe Present Business Problems / Challenges:

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Describe Future Plans for the Business:

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Please tick the **TWO** most important areas of expertise the Mentor should have:

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|--------------------|--------------------------|-----------------------|--------------------------|
| 1. Sales           | <input type="checkbox"/> | 8. Finance            | <input type="checkbox"/> |
| 2. Marketing       | <input type="checkbox"/> | 9. I.C.T.             | <input type="checkbox"/> |
| 3. Exporting       | <input type="checkbox"/> | 10. Business Planning | <input type="checkbox"/> |
| 4. Production      | <input type="checkbox"/> | 11. Taxation          | <input type="checkbox"/> |
| 5. Costing         | <input type="checkbox"/> | 12. Public Relations  | <input type="checkbox"/> |
| 6. Start-up        | <input type="checkbox"/> | 13. Tourism           | <input type="checkbox"/> |
| 7. Human Resources | <input type="checkbox"/> | 14. Patents           | <input type="checkbox"/> |

Other (Please Specify):

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How soon do you need a Mentor?

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Signed:

\_\_\_\_\_  
Promoter

Date:

\_\_\_\_\_

Please return completed application form to:

**Local Enterprise Office  
Ballingarrane House  
Cahir Road  
Clonmel  
Co Tipperary**