**INAHTA Mentorship Program**

*Mentorship Proposal*

This form is to be completed in response to a Mentorship Request. Please complete the following form and submit it directly to the Requestor with a ‘cc’ to the INAHTA Secretariat via email at [INAHTA@ihe.ca](mailto:INAHTA@ihe.ca). Where a formal procurement document is included with the Request for Mentorship, be sure to follow any specific requirements described therein.

Further details of the INAHTA Mentorship Program are provided in the *INAHTA Mentorship Guidelines* document available on the INAHTA website <http://www.inahta.org/hta-tools-resources/mentorship/>. If you would like to make a general offer for mentorship, please use the *General Offer to Mentor* form available on the INAHTA website.

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| **Mentorship Proposal** | |
| Which Request for Mentorship are you responding to? |  |
| Name of Individual requesting mentorship: |  |
| Short description/title of mentorship requested: |  |
| Your information | |
| Name |  |
| Email |  |
| Telephone |  |
| Nationality |  |
| Mailing Address |  |
| Date of response submission  (dd-mm-yyyy): |  |
| Agency/employment information | |
| Do you currently work for an HTA agency or body? | Yes No |
| * If **yes**: |  |
| What is the agency name? |  |
| Agency URL? |  |
| What ‘level’ is the agency? | Local  Regional  National  Hospital  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * If **no**, describe your work situation, e.g., consultant, retired, other (specify): |  |
| Description of mentorship offered | |
| *Please describe the type of mentorship you are offering and how it would satisfy the requirements of the Request for Mentorship you are responding to. Be as specific as possible. Max 500 words. Please attach a separate CV and submit it along with this completed form.* | |
| Financial aspects | |
| *Are you or your agency/employer able to provide financial support for this mentorship? If so, please describe. Include any in-kind contributions.* | |
| *Aside from any funding provided by the organization requesting the mentorship, are you aware of any additional sources of financial support that could be accessed to support this mentorship? If yes, please describe.* | |
| Additional Information | |
| *Provide or attach any additional information you wish.* | |