

Details of a Qualified Leader changing roles and requiring additional mentoring

This form applies to warranted assistant leaders who now wish to become unit leaders (LQ module 4) and any leader wishing to change Section (LQ module 1).

Please complete and send to your Division Leader Co-ordinator so she can find a suitable mentor.

THE INFORMATION SUPPLIED ON THIS FORM WILL BE HELD IN A DATABASE FOR MEMBERSHIP ADMINISTRATION PURPOSES ONLY.

Leader details

|  |  |
| --- | --- |
| Name (incl Title)  Date of Birth | Preferred name |
| Address  Postcode | Tel (daytime) ( ……….. )……………………………..  Tel (evening) ( ………...)………………………….  Mobile ………………………………..………..…  Email ……………………………………………..  Fax ………………………………………………….. |
| Unit | |
| Meeting Day and Time | |
| Meeting Place | |
| Name of District and District Commissioner (if applicable) | |

Transport (please ✓)

Drives own car 🞎 Has access to a car 🞎

Near Public transport 🞎 Has difficulty finding transport 🞎

Please circle days and times when the Leader may be available to meet/speak with your mentor

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Monday am/pm/eve | Tuesday am/pm/eve | Wednesday am/pm/eve | Thursday am/pm/eve | Friday am/pm/eve | Saturday am/pm/eve | Sunday am/pm/eve |

Please indicate the earliest time in the day she may be contacted ……………………………

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Module(s) required (Please ✓) 1 🞎 4 🞎

Signature of leader / YL…………………………………………………………… Date………………………………

Membership Number …………………………………………………………….