**CNA PASS Mentorship Program**

**Application to Serve**

1. Please provide your contact information:

Name:

CNA certification # (if applicable):

Address:

Telephone:

E-mail:

Spoken language(s):

Please indicate if you are willing to mentor more than one IEN: Yes □ No □

1. Please indicate your specialty area(s) of practice throughout your career:

|  |  |
| --- | --- |
| * Cardiovascular
 | * Nephrology
 |
| * Community Health
 | * Neuroscience
 |
| * Critical Care
 | * Occupational Health
 |
| * Critical Care Pediatrics
 | * Oncology
 |
| * Emergency
 | * Orthopaedics
 |
| * Enterostomal Therapy
 | * PeriAnesthesia
 |
| * Gastroenterology
 | * Perinatal
 |
| * Gerontology
 | * Perioperative
 |
| * Hospice Palliative Care
 | * Psychiatric and Mental Health
 |
| * Medical-Surgical
 | * Rehabilitation
 |
| * Administration
 | * Other (please identify)
 |

1. Please indicate the province(s) or territory(s) you have practised in?

|  |  |
| --- | --- |
| * Alberta
 | * Northwest Territories
 |
| * British Columbia
 | * Ontario
 |
| * Manitoba
 | * Prince Edward Island
 |
| * New Brunswick
 | * Quebec
 |
| * Newfoundland and Labrador
 | * Saskatchewan
 |
| * Nova Scotia
 | * Yukon
 |
| * Nunavut
 |  |

1. Please outline why you wish to become a CNA PASS mentor:
2. Please describe an experience you have had that will help you be an effective mentor in the CNA PASS program:
3. By applying to be a CNA PASS Mentor you are agreeing (to the best of your ability) to do the following:
* Participate in two one-hour webinars and two 30-minute self-learning modules
* Connect via e-mail or Skype with an IEN:
	+ at least three times (for those arriving within six weeks)
	+ at least four times (for those arriving within eight weeks)
	+ at least five times (for those arriving within ten weeks)
	+ at least once for those now in Canada (within four to six weeks of their arrival)
* Complete an evaluation of the CNA PASS program
* Commit to a one-year term (with the potential for renewal)

Please complete and return this application form by **Monday, June 27, 2016,** in one of three ways:

1. E-mail a pdf version to Margarita Pardo at mpardo@cna-aiic.ca
2. Fax the form to (613) 237-3520
3. Call Margarita, at (613) 237-2159, ext. 363, who will complete the form on your behalf

## If you have any questions, please contact Margarita Pardo, senior administrative assistant at CNA Certification and Professional Development:

## Tel.: (613) 237-2133 (ext. 363)

## Toll-free: 1-800-361-8404 (ext. 363)

**Thank you for considering being a CNA PASS mentor!**