

Tourism Business Mentorship Program

MENTEE Application Form (Stream 1)

Please submit the completed application form, along with your Business Plan, to the Regional Tourism Officer at your Regional ITI Office

1. Personal Information	
Name	
Legal Business Name	
Operating Name	
Business Address	
Town/City	Postal Code
Phone (home)	Phone (business)
Phone (cell)	
Email	
Number of years in business:	
2. Briefly describe the nature of provide:	your tourism business, including what services you
3. Briefly outline your work expe	erience, including any experience working in tourism:
4. List any Industry membership	os/affiliations or professional designations you hold:
5. Why do you think the Tourism you?	Business Mentorship Program is a good opportunity for
6. Describe any previous experie	ence you have had with a mentorship program.



7. Which program priority areas are you seeking mentorship in?
 □ Marketing □ Product Development □ Product Packaging and Pricing □ Business Planning □ Financial Management □ Human Resources Management □ Technology and Business □ Business Performance Management □ Tourism Operations Management: □ Ecotourism Operations □ Fishing Lodge Operations □ Outdoor Adventure Operations □ Community Tourism Development, Planning and Operation
8. What are your business/career goals? Within the next 12 months
Within the next 3 years 9. How will the mentorship program help you achieve your specific business/career goals?
10. Describe any additional experience or expectations that you have that could be of interest to the Mentor.
 11. What is your preferred method of regular contact with the mentor? (Please check one) Face to face Skype E-mail Phone Social networks
9. How will you personally measure the success of the Mentor program? (e.g. learn new skills, develop a new tourism product or service, develop a marketing plan, build business networks)





10. Please indicat	e below any reasons	you may not be	e able to commi	it to the full length	of
the mentorship pr	rogram.				

NB: Please attach your business plan.

I agree to give Industry, Tourism and Investment (ITI) and the Canadian Executive Services Organization (CESO) permission to use parts or all of the information contained within this application in their publication and reports. I am aware that my personal information will not be disclosed to other sources.

I agree to the terms of mentorship as outlined by ITI and CESO.

Signature of Applicant

Date

Signature of Regional Tourism Officer

Date