

MENTORING AGREEMENT

Provisional Members require a mentor while attaining their 18 months of forestry experience. The mentoring process is intended to help develop and improve the professional practice of the Provisional Member. For more information please review the [Mentorship Instructions](#). **The mentor must be a Full, Associate, Inactive or Life Member of the OPFA or other registered forestry professional in Canada who is in good standing with their regulatory body.**

The completed form must be submitted by the mentor directly to the OPFA office by email to opfa@opfa.ca or by regular mail to the Ontario Professional Foresters Association, 201-5 Wesleyan Street, Georgetown, Ontario, L7G 2E2. Section 1 must be submitted at the beginning of the mentorship. Section 2 must be submitted at the conclusion of the mentorship period. The information provided in this form is confidential and for OPFA use only during the application process.

Section 1: Establishment of Mentorship

To be completed by the Provisional Member

OPFA #:

Last Name

First Name

By affixing my signature to this agreement, I confirm that:

I assume primary responsibility for:

- (1) meeting with the mentor regularly (in person or otherwise) to discuss work undertaken, professional development and the progress towards achieving registration goals/outcomes;
- (2) submitting a Mentoring Agreement with each mentor and whenever I change mentors.

Provisional Member Signature:

Date:

To be completed by the mentor

OPFA #

Last Name

First Name

If you are not a member of the OPFA but are a registered forestry professional in another province:

Province:

Designation:

Registrant #:

I,

agree to act as Mentor for

Print Mentor's Name

Print Provisional Member's Name

Date mentorship began:

(YYYY/MM/DD)

By affixing my signature to this agreement, I confirm that:

- (1) I assume responsibility for overseeing the growth and development of the Provisional Member and broadening their knowledge and experience by guiding them towards opportunities to work with, accompany, or observe, other practitioners;
- (2) I will inform the OPFA if I become aware that the Provisional Member may not be meeting their obligations under the OPFA Mentoring Agreement;
- (3) I will meet with the Provisional Member regularly (in-person or otherwise) to discuss work undertaken, professional development and their progress towards achieving their goals/outcomes.

Mentor Signature:

Mentor Stamp or Seal:

Date:



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Section 2: Conclusion of Mentorship

Upon conclusion of the mentorship period, this section of the Mentoring Agreement must be submitted **by the mentor** directly to the OPFA office by email to opfa@opfa.ca or by regular mail to the Ontario Professional Foresters Association, 201-5 Wesleyan Street, Georgetown, Ontario, L7G 2E2. The information provided in this form is strictly confidential and for OPFA use only during the application process.

To be completed by the mentor

Last Name	First Name	OPFA #
If you are not a member of the OPFA but are a registered forestry professional in another province:		
Province:	Designation:	Registrant #
I, _____	acted as mentor for	
Print Mentor's Name		Print Provisional Member's Name
Date mentorship began:	(YYYY/MM/DD)	
Date mentorship period was completed or ended:		(YYYY/MM/DD)
If there were any pauses in the mentorship during this time, please provide information and dates below:		

Mentor Signature:

Mentor Stamp or Seal:

Date: