Mentoring - GTO Declaration Form

This template supports your MOU with LGPro and AEN which requires evidence of Mentoring to be provided.

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| **GTO Name:** |  |
| **Council Name:** |  |
| **Participant Name:** |  |
| **Participant Date of Birth:** |  |
| **EMPLOYMENT MENTORING DETAILS** |
| **Date Commenced Employment:** |  | **Date of 24-week milestone** |  |
| **Still in Employment: (Y/N):** |  | **Date Ceased Employment (if applicable):** |  |
| **DETAILS OF SUPPORT OFFERED TO PARTICIPANT (date and method of contact)** **ISSUES IDENTIFIED (IF ANY) AND ACTION TAKEN** |
|  |

## GTO Declaration:

* I certify that all information recorded is accurate;
* I have evidence to support the information contained in this form.

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Date** |  |
| **Signature** |  |