**Mentoring programme**

**"Progressio. Successful development in academic leadership"**

Application form for mentees

Dear applicant,

I am pleased that you are interested in mentoring for experienced postdoctoral researchers, junior professors, junior research group leaders and tenure track professors.

During the application procedure, we require some additional information from you to help the selection committee reach a suitable decision. At the same time, this information helps us to adapt the mentoring programme to your individual expectations and goals.

Your personal data will be treated confidentially and used exclusively within the mentoring programme by the selection committee.

Please send us your completed application form with a short letter of motivation (max. one page) either as scanned PDF document via email or by post to the address given below by **30.06.2024**. For more detailed information about the mentoring programme, see [here](https://uol.de/en/academic-research/graduate-academy/courses/6-mentoring/helene-lange-mentoring-programm-fuer-wissenschaftlerinnen/progressio-spitzenpositionen-in-der-wissenschaft-erfolgreich-gestalten).

If you have any further questions, please do not hesitate to contact me by email or telephone.

Kind regards,

Dr Susanne Elpers

Dr Susanne Elpers

Department for Research and Technology Transfer

Room: OECO 2-213

Mentoring programme coordinator

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Tel: +49 (0)441 – 798 2939

Email: [susanne.elpers@uol.de](mailto:susanne.elpers@uol.de)

1. **Personal data**

|  |  |
| --- | --- |
| Your details |  |
| Surname and title |  |
| First name |  |
| Place and year of birth |  |
| Your current position |  |
|  |  |
| Office address |  |
| School |  |
| Institute |  |
| Street and house number |  |
| City/Post code |  |
| Telephone |  |
| Email |  |
|  |  |
| Home address |  |
| Street and house number |  |
| City/Post code |  |
| Telephone |  |
| Email |  |
|  |  |
| Please send correspondence regarding mentoring to: | 🞏My home address  🞏My office address |
| Are you the first person in your family to attend university?  (For preferential consideration in the application procedure. This information will only be passed on to the persons involved in the application procedure and will only be forwarded to (potential) mentors on the applicant’s explicit request. In your letter of motivation, please refer to whether it was or is important for you to be the first to attend university in your family.) | 🞏 Yes  🞏 No  🞏 Not specified |
| Family responsibilities  (For preferential consideration in the application procedure. This information will only be passed on to the persons involved in the application procedure and will only be forwarded to (potential) mentors on the applicant’s explicit request.) | 🞏 I have a child/ children  🞏 I provide care for a relative in need of care.  🞏 Not specified |
| Disability details  (For preferential consideration in the application procedure. This information will only be passed on to the persons involved in the application procedure and will only be forwarded to (potential) mentors on the applicant’s explicit request.) | 🞏 Yes  🞏 No  🞏 Not specified |
| I agree that my email address will be shared with other programme participants for the purpose of networking and sharing information. | 🞏 Yes  🞏 No |

1. **Your academic background**

|  |  |  |  |
| --- | --- | --- | --- |
| Doctorate |  | | |
| University/school/institute |  | | |
| Topic of your doctoral thesis |  | | |
| Supervisor(s) |  | | |
| Duration of the doctorate |  | | |
| Month and year of completion |  | | |
| Doctorate funding | 🞏Academic position  🞏 Scholarship  🞏 Independent | | |
| Habilitation (if applicable) |  | | |
| University/school/institute |  | | |
| Topic of your habilitation thesis |  | | |
| Supervisor(s) |  | | |
| Duration of the habilitation phase |  | | |
| Year of completion/expected time of completion |  | | |
| Habilitation/postdoctoral funding | 🞏Academic position  🞏 Scholarship  🞏 Independent | | |
| Other positions |  | | |
|  | Duration: | Location | Function/title |
| Postdoctoral position (also Akad. Rätin (senior lecturer)) |  |  |  |
| Junior professor |  |  |  |
| Adjunct professor |  |  |  |
| External position (outside academia) |  |  |  |

1. **Current fields of activity and career goals**

|  |  |
| --- | --- |
| Current fields of activity |  |
| What are your current fields of activity? (Research, teaching, research management, academic self-administration) |  |
| Which interdisciplinary topics have you already gained further qualifications in? |  |
| Career goals |  |
| What career goals have you set for the next three years? |  |
| What are your long-term career goals? |  |

1. **Participation in the mentoring programme ‘Progressio. Successful development in academic leadership**

|  |  |
| --- | --- |
| Motivation and expectations |  |
| What motivated you to apply for the mentoring programme? |  |
| I have the following expectations of my mentor:  (Multiple entries possible) | 🞏 Knowledge of structures, processes and informal rules of the academic system  🞏 Assistance in planning my next career steps  🞏 Insights into building and maintaining networks  🞏 Advice on leadership behaviour  🞏 Exchange on work organisation and time management  🞏 Insights into work-life balance  🞏 Exchange on application and appointment procedures  Assistance in addressing specific challenges during the qualification period as a post-doctoral researcher/junior professor/junior research group leader/tenure track professor  🞏 Other: |
| What support do you expect from the mentoring programme? |  |

1. **Mentors**

As a mentee, you choose your mentor yourself. There is no pool. As a rule, the university management, in cooperation with the coordinator, addresses the official request to the desired mentors. Here you have the possibility to indicate your desired mentor. The information about your desired mentor is optional and not binding.

In the preparatory workshop on 22. and 23.10.2024, you will have the opportunity to further specify your mentoring objectives and needs and to review the choice of your mentor. Afterwards, the matching process begins, which includes recruiting suitable mentors and forming mentoring partnerships.

|  |  |
| --- | --- |
| General criteria for your mentor |  |
| Academic discipline | 🞏 From the same discipline as me  🞏 From another discipline |
| Gender | 🞏 Female  🞏 Male  🞏 No preference |
| Mentor is a member of the University of Oldenburg | 🞏 Yes  🞏 No  🞏 No preference |

Please provide nominations for your desired mentor in the following fields, insofar as you can already provide information. Professors of the University of Oldenburg and professors of other universities as well as managers of non-university research institutions are eligible to become mentors.

You may also leave these fields empty.

|  |  |
| --- | --- |
| 1. Desired mentor |  |
| Title |  |
| Last name, first name |  |
| University/school/institute |  |
| Street and house number |  |
| City/Post code |  |
| Email |  |
| 1. Desired mentor |  |
| Title |  |
| Last name, first name |  |
| University/school/institute |  |
| Street and house number |  |
| City/Post code |  |
| Email |  |
|  |  |

1. **Supporting programme**

During the course of the twelve-month programme, workshops or lectures will also be held, which, in addition to providing interdisciplinary knowledge, will also offer a networking opportunity for mentees. External trainers or speakers can be invited to these events. Possible topics may include: ‘Careers for female researchers. Gender as a career factor’, ‘Performance criteria, rankings, evaluations – dealing with the system’, ‘Leadership in science’, ‘Leading appointment negotiations’, ‘The German academic system’, ‘Team building for chairs’ ...

Participants will have the opportunity to express their own wishes and suggestions for topics and formats:

|  |  |
| --- | --- |
| Topic | Format (workshop/discussion evening/lecture or similar) |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. **Consent for data processing**
2. I agree that the personal data I provide in the application form will be included in the mentoring programme records.

🞏 Yes 🞏 No

1. I agree that the following personal data will be passed on to my mentor: Address, email address, current professional position, discipline.

🞏 Yes 🞏 No

1. I agree that any personal data I have provided regarding a disability will be forwarded to my mentor.

🞏 Yes 🞏 No

1. After completing the programme, I agree that my email address may continue to be used to build and maintain the mentoring network.

🞏 Yes 🞏 No

1. The personal data collected will be treated confidentially and – apart from the cases mentioned under 2 and 3 – will not be disclosed to third parties. My personal data will be erased if I no longer participate in the mentoring programme.
2. I may withdraw my consent to the storage and disclosure of my data at any time without giving any reason. If I am still a participant in the mentoring programme at that time, I acknowledge that I may no longer be able to use all services provided by the programme.
3. I agree to attend the workshops/discussion evenings/lectures and other events in the supporting programme (preparatory workshop, kick-off workshop, interim workshop, final workshop) as well as in the programme evaluation.

|  |  |
| --- | --- |
| Date, place | Signature |