



## Application form for mentees

Application deadline 15 March, 2026

Name:		First name:	
Address:		Zip code and city:	
Phone number:		E-Mail:	
Doctoral subject:		Date of the final (oral) exam:	
Date of birth:		Child(ren): yes <input type="checkbox"/> no <input type="checkbox"/>	
Experiences with mentoring:	Have you already participated in a program as a mentee?	<input type="checkbox"/> yes, UPB <input type="checkbox"/> yes, program of another university <input type="checkbox"/> no	

### A. Professional Career

1. Please briefly describe your current professional situation. (Employment at UPB, time frame, main areas of focus, projects, type of funding)

2. What are your professional goals? What appeals to you about a career in science? Where do you see challenges?

#### **B. Expectations for the mentoring program**

1. What do you personally expect to gain from participating in the mentoring program? What about the program motivates you to apply?

2. What questions and topics would you like to clarify or discuss in the mentoring program?

3. The mentoring program thrives on the commitment of all participants. What experiences/knowledge/interests would you like to contribute to the program?

Please send us the completed **application form** and a **curriculum vitae** in tabular form to [mentoring@upb.de](mailto:mentoring@upb.de)

Mentoring-Programm für Post-Doktorandinnen  
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Phone Number: 05251 – 60 3098  
[mentoring@upb.de](mailto:mentoring@upb.de)

Participation in the mentoring program offers opportunities and benefits, but also entails certain obligations on your part:

- Participation in the events organized as part of the program
- Actively shaping the mentoring relationship and the peer group
- Participating in the evaluation and documentation of the program
- Providing timely information about changes in your personal situation that are relevant to the program (e.g., acceptance of a job, change of contact details, difficulties in the mentoring relationship)

I have the time to actively participate in the program.  
 I confirm that the information I have provided is correct.

If you are accepted into the program, we will use the application form to contact you and anonymously evaluate the program. We require your consent for this:

#### **Declaration of consent**

I agree to be included in the mentee file of the Paderborn Mentoring Programme with the above information. The data will only be used by the coordinator to contact me and in anonymised form to evaluate the programme.

My rights to information, correction, deletion and blocking of the data (in accordance with §§ 18, 19 of the NRW State Data Protection Act) are not affected by this consent.

Place, Date

Signature