**Mentorship Declaration for Mentors & Students**

Complete this form to claim PDPs towards being mentored or providing mentorship.

**Mentors** can earn PDPs for coaching personal trainers to improve their knowledge, skill set and to ultimately become a stronger communicator and role model. **Students** in turn learn from industry experts to develop an understanding of the fundamentals of fitness, effective coaching and everything in between to help clients progress.

**In order to earn PDPs for being mentored or for providing mentorship, the following criteria apply:**

* Minimum 6+ week period for effective mentoring (12+ ideal).
* Minimum 6 contacts for 30 mins within a 6-month period (within the registrant’s current 2-year registration period).
* Mentoring activity spread sporadically across the 2-year registration period will not be recognised unless there are at least 12 meaningful contacts/activities in at least one block of the 12 months of the 2-year period.
* **Student must:**
	+ Have either Group Exercise Leader (GEL) certification or mapped equivalent or Cert 3 and 4 as a minimum standard.
* **Mentor must:**
	+ Have either Group Exercise Leader (GEL) certification or proven equivalent or Cert 3 and 4 or mapped equivalent (degree or diploma qualified).
	+ Have minimum 4 years of continuing industry relevant employment and fitness registration
	+ Work within their scope of practice as set out in PAA’s Scope of Practice document, e.g. No nutritional planning or boxing training unless you hold a relevant qualification etc.
* Mentoring content should be fitness or fitness business relevant.

|  |
| --- |
| **Declaration**Registration No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Tick one** **ο** I have completed mentoring for 6-11 weeks (1 PDP)**ο** I have completed mentoring for 12+ weeks (2 PDP)**ο** I have completed mentoring for \_\_\_\_\_\_\_\_\_ weeks (PDPs upon request) |

**Mentorship Details**

|  |  |
| --- | --- |
| **Start date** |  |
| **End date** |  |
| **Contact time per week/fortnight** (e.g. 30mins, 45mins or 60mins sessions) |  |
| **Location / Delivery:** (define whether you met face to face or via phone or video call. E.g “we met once a week and scheduled a 30 minute phone call once a fortnight”. ) |  |
| **Mentoring subject / topic** (what was covered in each session)  | Session 1:Session 2:Session 3:Session 4:Session 5:Session 6:Session 7:Session 8:Session 9:Session 10:Session 11:Session 12:\*Please add additional pages if required and attach to this declaration.  |
| **Briefly describe what competencies and skills were developed during the mentoring period.**  |  |
| **Feedback – what did the student/mentor say about the mentorship program and how has it:** * improved their career
* broadened their skills and knowledge
* etc
 |  |
| **Reflection – what have you learned from providing or undertaking this mentorship program and what would you do differently next time?**  |  |

**I hereby declare that the information I have provided within this document is true and correct.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email this document to register@physicalactivityaustralia.org.au or post it using the details below.

