

**CANDIDATE QS MENTORING FORM**

(to be submitted with the CPD logbook) – 0.5 points per meeting per month (to meet atleast once a month)

Commencement date of mentorship ……………………………………………….

**MENTOR DETAILS**

|  |  |
| --- | --- |
| Name of PrQS:  |  |
| Registration number: |  |
| Practicing Number: |  |
| Current location: |  |

**MENTEE DETAILS**

|  |  |
| --- | --- |
| Name of CanQS:  |  |
| CanQS Registration number: |  |
| Current location: |  |
| Current employer: |  |

Indicate when the PrQS met with the CanQS by completing the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of meeting** | **Duration** | **Purpose of meeting** | **COMMENTS by CanQS on outcome of the meeting** |
| Month 1 -  |  |  |  |
| Month 2 -  |  |  |  |
| Month 3 - |  |  |  |
| Month 4 -  |  |  |  |
| Month 5 -  |  |  |  |
| Month 6 -  |  |  |  |
| Month 7 -  |  |  |  |
| Month 8 -  |  |  |  |
| Month 9 -  |  |  |  |
| Month 10 -  |  |  |  |
| Month 11 -  |  |  |  |
| Month 12 - |  |  |  |

**Signed**: …………………………………………………… ……………………………..

 PrQS Date

 ……………………………………………………… ……………………………..

 CanQS Date