



253 West Joe Orr Rd  
Chicago Heights, Illinois 60411  
708-754-6600 708-754-8687(Fax)

***E-mail or Fax completed application to [jvrshek@s-cook.org](mailto:jvrshek@s-cook.org)***

**Form A**

**New Principal Mentoring Program**

**Mentor Application Form**

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

Address: \_\_\_\_\_

Phone (cell): \_\_\_\_\_ (home): \_\_\_\_\_

Email: \_\_\_\_\_

A. Principalship experience: list all full-time Illinois principalships including name of school, district, grade span, and full years of experience at each school.

1.

2.

3.

4.

5.

B. Please respond to the following two (2) prompts.

1. I want to mentor new principals because

2. I can add value to the quality of the New Principal Mentoring program because

C. List the names and full contact information of at least three professional references. You must include a written reference from a superintendent or assistant superintendent who served as your direct supervisor, a certified teacher leader who served at least one full year under your supervision, and a principal colleague who observed or knows your work.

	Name	Position	District	Phone	Email
1.					
2.					
3.					

D. Attach three (3) letters of reference from the professionals listed above which address the following requirements to be a DNPMP coach:

- Evidence of strong ethical character
- Evidence of strong inter-personal skills
- Evidence of instructional leadership (defined as but not limited to:) ability to facilitate a vision of learning within a school, ability to develop and sustain a collaborative professional learning community, ability to develop and sustain a positive school culture and instructional program, ability to effectively advocate for students by influencing the greater political, social, economic, legal, or cultural context of the professional learning community
- Nature of the working relationship between you and the reference
- One or more specific examples of your accomplishments related to the IPSL standards noted above

E. Assurances

1. I have never been dismissed from an Illinois principalship.
2. I have a valid Type 75 Administrative Certificate.
3. I will attend the required foundational training and the 3 day CLASS foundational training at a location and time to be announced.
4. I will participate in the six (6) on-going training of mentors meetings scheduled by the DNPMP in 2007-08.
5. If selected as a mentor, I will comply with all of the DNPMP mentor's responsibilities as listed on the mentor/new principal agreement and the mentor/new principal match forms.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Form B.1**  
New Principal Mentoring Program  
Coaching Agreement

Coach Agrees

- To honor the confidentiality of work with Participant
- To provide one-on-one support to Participant for a minimum of 8 hours per month
- To utilize proven coaching approaches in work with participant
- To serve as a support to Participant when possible by securing information, contacts, and other resources as requested and as appropriate
- To respond to participant in a timely manner between coaching sessions via telephone or e-mail
- To honor the demanding schedule of site administrators, offering services on site whenever possible and avoiding duplication of programs and commitments
- To convene and facilitate occasional job-alike and topical gatherings of program participants
- To commit to supporting the success and effectiveness of Participant as the primary focus and purpose of the program

Participant agrees

- To fully avail him/herself of the support offered by the Coach
- To work with the Coach to identify meaningful goals for the program, in concert with the development of individual goals as required by the Participant's school district
- To approach the coaching relationship with openness and honesty
- To arrange for observations of real-work situations that will allow for targeted coaching, to include at a minimum:
  - √ A teacher observation cycle
  - √ Facilitation of a staff or site council meeting
- To participate in the evaluation of the program and to contribute ideas to the design and revision of the program
- To take full advantage of written materials and other resources made available by the program

Participant: \_\_\_\_\_

Coach: \_\_\_\_\_

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



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**Form C**  
New Principal Mentoring Program  
Collaborative Log

CANDIDATE: \_\_\_\_\_ DATE: \_\_\_\_\_

MENTOR: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

TYPE OF MEETING OR ACTIVITY: \_\_\_\_\_ DURATION (hours): \_\_\_\_\_

What's Working?	Current Focus, Challenges, Concerns
Coach's Next Steps	Coach's Next Steps
Next Meeting Date	Next Meeting Agenda

