

WiNUP Ohio Chapter Mentoring Program



OHIO CHAPTER

Mentoring Program Handbook

Mentoring Program Committee Purpose Statement

Our purpose is to provide support for professional development and growth within the utility industry to members of WiNUP by sharing expertise and experience through an organized mentoring program.

WiNUP Ohio Chapter Mentoring Program

Table of Contents

OHIO CHAPTER MENTORING PROGRAM PROCESS.....	3
Background	4
What is Mentoring?	5
Who Should Participate in a Mentoring Program?.....	5
The Role of the Mentor.....	6
The Role of the Mentee	7
What is Essential for Success?	7
How do I get Started?	8
LETS GET STARTED	11
Sample Announcement Letter.....	12
EXPRESSION OF INTEREST APPLICATION FORM	13
Expression of Interest Application Form.....	14
NOTIFICATION LETTERS	17
Sample WiNUP Mentoring Notification Letter for Mentee	18
Sample WiNUP Mentoring Notification Letter to Mentor.....	19
TRAINING MATERIAL.....	20
EVALUATIONS	48

WiNUP Ohio Chapter Mentoring Program

OHIO CHAPTER MENTORING PROGRAM PROCESS

WiNUP Ohio Chapter Mentoring Program

Ohio Chapter Mentoring Program Process

Background

The WiNUP Ohio Chapter Mentoring Committee was created to support the mission of the International WiNUP Organization in its efforts to provide personal and professional development by providing mentoring for our members.

The program was initiated as a result of a survey conducted among our members. Through this survey our members expressed a high level of interest in having and participating in a Mentoring Program.

The WiNUP Mentoring Program is designed for the mutual benefit of both the Mentor and Mentee. The benefits obtained for each party will be in direct proportion to the effort put into the relationship. As in all professional relationships neither party should abrogate their freedom of self-direction and choice. WiNUP can not be held responsible for the outcome of advice given by the Mentor. Confidentiality and respect are a required foundation for a successful mentoring relationship.

The objectives of the Mentoring Program are to achieve one or more of the following goals:

- Assist individual with growth and organizational change
- Improve personal performance
- Enable/assist/ease a career transition
- Develop future leaders
- Enable/assist/ease in personal transformation
- Overcome specific challenges
- Initiate a friendship with another utility professional

Mentoring Program is not:

- Telling
- Counseling
- Therapy
- Consulting
- Focused on correcting behavior issues

WiNUP Ohio Chapter Mentoring Program

What is Mentoring?

Mentoring is a developmental partnership through which one person shares knowledge, skills, information, and perspective to foster the personal and professional growth of someone else.

Who Should Participate in a Mentoring Program?

Those who want an experienced advisor in:

- Decision making
- Gaining insight
- An honest “reality check”
- Learning from experience
- Advice on career and professional challenges

An Ideal Mentor

- Listens
- Teaches by personal experience
- Counsels wisely
- Educates their mentee
- Is supportive
- Provides encouragement
- Supports the development of professional behavior and addresses negative behavior
- Challenges the mentee
- Regards the relationship as confidential
- Respects the goals of the mentee
- Takes responsibility for the initial meeting and building the relationship
- Offers a larger support network to the mentee by proving connections to appropriate resources

An Ideal Mentee

- Remembers they are learning
- Is prepared for the discussion and asks meaningful questions
- Is ready to take action and act on mentors advice
- Regards the relationship as confidential
- Is courteous and respects the mentors perspective
- Is open and receptive to the mentors feedback
- Is willing to explore new ideas
- Takes ownership of the relationship

WiNUP Ohio Chapter Mentoring Program

The Role of the Mentor

- Maintain confidentiality
- Partner with mentee to develop a relationship agreement
- Participate in mentoring training
- Provide post-mentoring relations critique
- Partner with the Mentoring Committee to achieve optional program development
- Deliver feedback in a constructive and encouraging manner
- Maintain focus on the goals stated in the relationship agreement
- Actively participate and keep commitments with mentee
- Support and encourage goals of mentee without personal bias
- Commit to a 6-month mentoring relationship

What does an effective Mentor bring to the relationship?

- Expertise in a field
- Understanding of the corporate culture (avoiding potholes, how to get things done)
- Professionalism
- Ability to focus on mentee's goals
- Willingness to provide candid feedback to mentee

WiNUP Ohio Chapter Mentoring Program

The Role of the Mentee

- Maintain confidentiality
- Partner with mentor to develop a relationship agreement
- Provide post-mentee relations critique
- Focus on no more than three goals
- Respond to feedback in non-defensive manner
- Arrives at each meeting with a willingness to learn
- Be willing to put forth the effort to change
- Celebrate successes
- Develop long-term plans for development
- Keep commitments
- Take ownership of decisions
- Commit to a 6-month mentoring relationship

What does an effective Mentee bring to the relationship?

- Open mind
- Willingness to hear candid feedback
- Draft of career goals or challenges
- Willingness to invest the time to achieve goals
- List of perceived strengths and weakness
- Willingness to engage in a trusting relationship
- Willingness to learn
- Willingness to listen

What is Essential for Success?

- Energetic engagements between mentor and mentee
- Active participation by mentor and mentee
- Follow through on plans
- Development of a mutually trusting and respectful relationships
- Development of achievable Mentee goals
- Mentor and mentee personal growth

WiNUP Ohio Chapter Mentoring Program

How do I get Started?

Program Length

The relationship will initially run for 6-months and may disband at that time, at the discretion of the match. However, if both the mentee and mentor believe they have more work to complete, they may continue the relationship for a longer period of time on an informal basis.

1. Expression of Interest Submission

An e-mail communication will be sent to the WiNUP General Membership requesting participants for the next WiNUP Mentoring Program Session. Additional e-mails can be generated to non WiNUP members asking for mentor participation. Interested mentors and mentees will submit an Expression of Interest Form to the Ohio Chapter Mentoring Committee. The form assures that you give as much information as possible to assist in the matching process.

The Mentoring Committee will establish the following sub-committees to work through the mentoring relationship process.

2. Selection Committee - Form Review

The Mentoring Committee will establish a Selection Committee of no more than 5 members to review each applicant form and either solicit mentors to fulfill these requests or contact mentors that have been listed by the applicant.

3. Selection Committee – Participant Notification

Mentors and mentees will be notified by the Selection Committee who they are to be matched with according to the information received. The mentor and mentee will be notified of the match via a notification letter. In addition to the notification letter the mentor will receive a copy of the mentees application form for review prior to the reception and training session. The Selection Committee will create and forward a participant tracking list that includes the participant's name, participant status and e-mail address. The tracking list should be forwarded to the Training Committee after the notification letters have been distributed.

4. Training Committee - Training Session

The reception and training session will be the first official meeting for the mentor and mentee. The mentor/mentee pair will be encouraged to schedule their second meeting prior to ending this session to discuss the relationship agreement and the goals for the mentee. The Training Committee will enter the training date on the participant tracking list and forward the list to the Evaluation Committee.

5. Evaluation Committee - Surveys

The Evaluation Committee will forward three surveys to the participants during the course of the program. The first survey will be conducted following training and will assess the on-boarding process. The second survey will be distributed approximately half way through the program and will address

WiNUP Ohio Chapter Mentoring Program

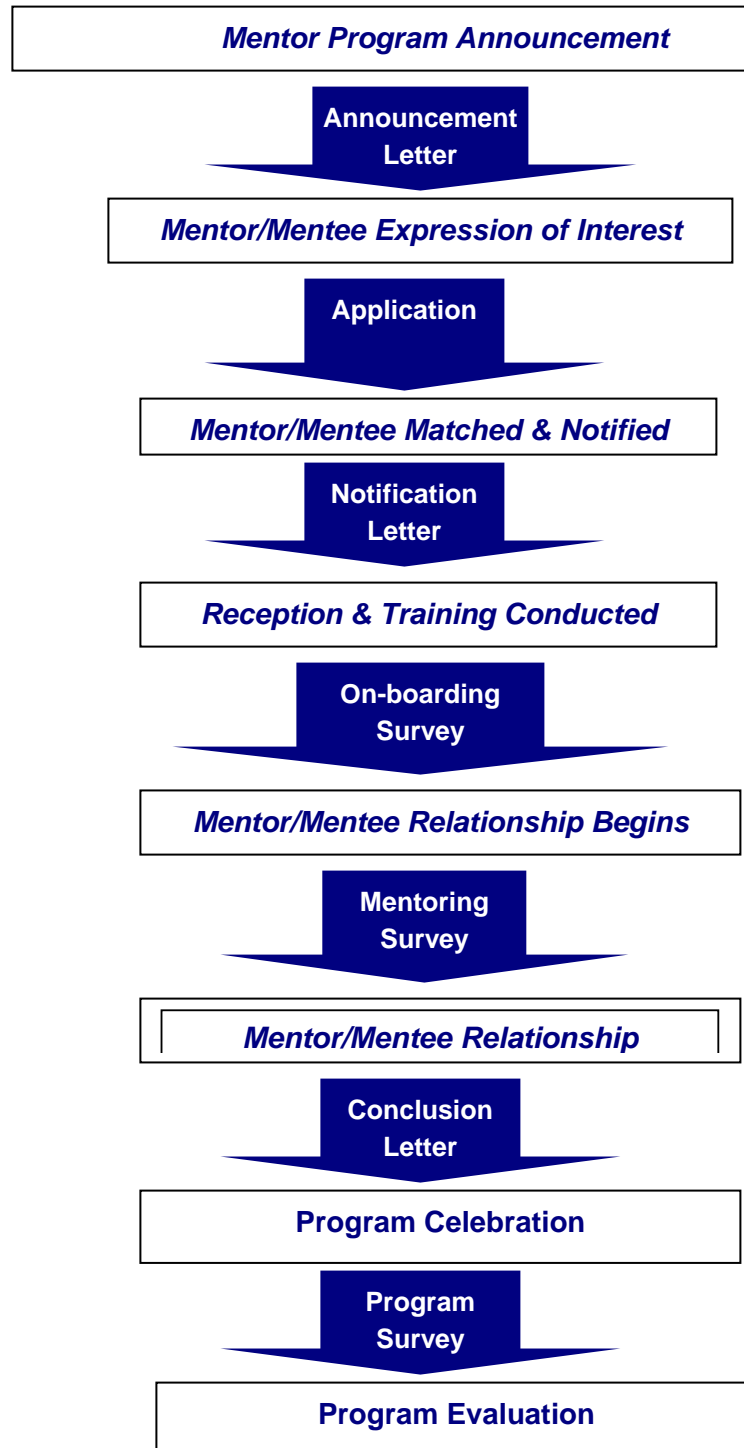
how the mentoring relationship is going. The last survey will be distributed at the end of the 6-months and will address the overall program experience. These evaluations are strictly confidential and will only be used to determine what areas of the program need additional improvement.

The Evaluation Committee will update the participant tracking list with the dates the surveys were distributed and returned. For each survey type the committee will compile the surveys along with a summary of their findings and present these to the Mentoring Committee at the next available Mentoring Committee meeting. The Evaluation Committee will update and forward the participant tracking list to the Selection Committee after the last survey presentation.

6. Celebration Committee - Moving On

At the end of the 6-months, the Selection Committee will forward the participant tracking list to the Celebration Committee. The committee will distribute a closing "Thank You" card to each participant inviting them to a small celebration to formally end the mentoring relationship. The Celebration Committee will update the participant tracking list and forward it to the Selection Committee for retention.

WiNUP Ohio Chapter Mentoring Program



WiNUP Ohio Chapter Mentoring Program

LETS GET STARTED

WiNUP Ohio Chapter Mentoring Program

Sample Announcement Letter



Dear WiNUP member,

I am excited to let you know about our Mentoring Program for XXXX. This program will provide not only an opportunity for women in leadership roles to coach fellow employees on the necessary skills to succeed in a professional environment, but also an opportunity for all members to develop themselves.

We are accepting applications for both mentors and mentees through xx/xx/20xx.

Those applying to become a mentor will be required to attend a 1.5 hour training session and to commit to a minimum of 1 (one) hour a month to the mentoring relationship.

There will be a toolbox available for mentors and mentees to assist in the mentoring relationship if needed. An icebreaker meeting will also be arranged to introduce mentors and mentees.

I have attached the application below. All applications must be returned by **June 16, XXXX**.

XXXXXXXX XXXXX
WiNUP Ohio Chapter Chair
www.winupoh.org

WiNUP 2009, The Year to Shine!

**EXPRESSION OF INTEREST
APPLICATION FORM**

WiNUP Ohio Chapter Mentoring Program

Expression of Interest Application Form

Mentor/Mentee Participant Application

Please select the role you are applying for. Mentee Mentor

Note: only members of the Ohio Chapter may apply for the role of mentee

Name: _____

Title/Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

WiNUP Ohio Chapter Mentoring Program

BACKGROUND INFORMATION

Current Position: _____

Length of time in position: _____

Professional Credentials: _____

What would you like to be doing in the next three years?

What do you hope to obtain from your participation in the Mentoring Program?

Mentees check any of the following where you would like mentoring assistance or if you are a **Mentor** check the following areas that you feel most comfortable mentoring.

Personal organization	Managing within the corporate culture
Communication	Finding the right resources
Supervising others	Project management
Assisting others in their development	Team building
Managing diversity	Strategic planning
Networking	Other _____

What is your preference as a Mentor or what is your preference as a Mentee?

_____ Male

_____ Female

WiNUP Ohio Chapter Mentoring Program

(Optional)

List the name of three of individuals you have considered establishing a mentoring relationship. A representative from the committee will contact these individuals in an attempt to match you with one of your preferences. In the event none of the individuals listed can accommodate the request we will proceed to find a match in our Mentor or Mentee pool

Note: Only members of the Ohio Chapter can participate in the role of a mentee however, there are no restrictions on who can participate in the role of a mentor.

1. _____
2. _____
3. _____

Are there any other requirements that you may have before being paired with a Mentor/Mentee?

Have you had previous involvement in a Mentoring Program? Was it successful? Please describe.

NOTE: Return completed form to WiNUP Mentoring Committee Chair for consideration

NOTIFICATION LETTERS

WiNUP Ohio Chapter Mentoring Program

Sample WiNUP Mentoring Notification Letter for Mentee

Dear **(Mentee's First Name)**,

It is my pleasure to welcome you into the 20XX WiNUP Mentoring Program.

We are excited that you have decided to participate in the program. Your participation and feedback will have significant value as we continue to make this a top notch program WiNUP members can enjoy for years to come.

The program will last six months. During the six month period you will be asked to complete three short surveys which we will be used to fine tune the program.

(Mentor's Full Name), (Mentor's Title) has been selected as your mentor. **(Mentor's First Name)** was selected because you had requested that one of our committee representatives contact him/her on your behalf. We feel his/her experience will be an asset in providing you solid advice, tips and recommendations.

We are currently working out the details for training along with a meet and greet in xx-xx-20xx. It is extremely important for you and your mentor to attend this session as we will be discussing the expectations and guidelines by which the program will run.

I am extremely excited and very optimistic that you will find this to be an exciting and worthwhile venture.

If you have any questions please don't hesitate to call me at xxx-xxxx.

Sincerely

Xxxxxxx Xxxxx

Mentoring Committee Chair

WiNUP Ohio Chapter Mentoring Program

Sample WiNUP Mentoring Notification Letter to Mentor

Dear Mr./Mrs./Miss **(Mentor's Last Name)**,

Thank you for accepting our invitation to participate in the WiNUP Mentoring Program. We are excited about the program and believe your feedback will provide significant value as we strive to provide our participants with a top notch mentoring experience.

We are asking for a minimum commitment of at least one hour a month for six months; the program duration. During the six month period you will be asked to complete three short surveys which will be used to fine tune the program for the future.

(Mentee's Full Name), (Mentee Title) has been selected as your mentee. **(Mentee's First Name)** would like to gain insight on how to better prepare for future roles in the organization. Her/His focus areas are networking, managing within the corporate culture, finding the right resources and strategic planning. I have attached **(Mentee's First Name)** participant application for your review to help with establishing the mentoring relationship.

We are currently working out the details for a half hour meet and greet in combination with an hour and a half training session on xx-xx-20xx. You will have an opportunity to meet and get to know Xxxxxx better during this meeting. It is extremely important for you to attend this session as we will be discussing the expectations and guidelines by which the pilot will run.

I am extremely excited and very optimistic that you will find this to be an exciting and worthwhile venture.

If you have any questions don't hesitate to call me at xxx-xxxx.

Sincerely

Xxxxxx Xxxxx

Mentoring Committee Chair

TRAINING MATERIAL

WiNUP Ohio Chapter Mentoring Program

Slide 6

The Role of the Mentor

- **What does an Effective Mentor bring to the relationship?**
 - Expertise in a field
 - Understanding of the corporate culture (avoiding potholes, how to get things done)
 - Professionalism
 - Ability to focus on mentee's goals
 - Willingness to provide candid feedback to mentee

6

WiNUP Ohio Chapter Mentoring Program

Slide 24

Resources Available

- **Supplements/Toolbox**

- Mentoring Objectives
- Personal Information Sheet
- List of Book References
- Mentoring Book Survey



<http://winupoh.org/committees/mentoring/mentoring.html>

24

WiNUP Ohio Chapter Mentoring Program

Slide 25

Mentoring Program Committee


Name	Telephone	E-mail
• Michelle Kinds	614-716-1816	mekinds@aep.com
• Krista Baker	740-568-2803	kdbaker@aep.com
• Jennifer Kernosky	614-716-1897	jlkernosky@aep.com
• Michele Jeunelot	614-883-6870	mljeunelot@aep.com
• Elaine Lovatt	614-716-2645	eflovatt@aep.com
• Grace Loprire	614-716-3078	mgloprire@aep.com
• Jacquelyne Martin	614-716-1168	jjmartin@aep.com
• Lila Munsey	614-716-2989	lpmunsey@aep.com
• Joan Mulia	614-552-2137	jmulia@aep.com
• Velda Otey	614-716-3710	veotey@aep.com
• Susan Potter	614-583-6218	sepotters@aep.com
• Ellen Regennitter	614-552-1335	eregennitter@aep.com
• Jodi Cannon	614-716-1564	jlcannon@aep.com
• Amy Russell	614-836-4217	acrussell@aep.com
• Veronica Sanford	614-716-2082	vsanford@aep.com
• Deanna Ward	614-716-1395	dlward@aep.com
• Alison White	614-716-7278	aawhite@aep.com
• Kristen Thompson	614-883-6889	ksthompson@aep.com
• Decoffette Ward	614-883-6832	dlward2@aep.com
• Lindsay Chambers	614-836-6922	lmchambers@aep.com
• Marsha Ringle	614-716-1071	mkringle@aep.com

25

WiNUP Ohio Chapter Mentoring Program

Slide 26

Q and A




**Women's International Network
of Utility Professionals**

26

WiNUP Ohio Chapter Mentoring Program

Slide 27

Thank you!!



We have now reached the point where it is time to begin setting and reaching our goals and to begin building positive, lasting relationships!

EVALUATIONS

WiNUP Ohio Chapter Mentoring Program

On-boarding Survey

This survey is the first of 3 surveys you will receive as part of the Mentoring Program. This survey addresses the application and the mentoring match-up process.

1. The application was clear, concise, and easy to complete.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

2. It was evident who to contact if you had questions on your application.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

3. The categories provided for matching you with a mentor/mentee were relevant to your need.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

4. If your categories were not identified, please provide the specific area you are looking for.

5. You received feedback on the receipt of your application in a timely manner.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

WiNUP Ohio Chapter Mentoring Program

6. Please provide any additional comments on the application process.

7. If we may contact you for additional feedback, please provide your contact information below

Name: _____

Email address: _____

Audinet number: _____

Thank you for completing this survey. Please return it to jjmartin@aep.com or kdbaker@aep.com

WiNUP Ohio Chapter Mentoring Program

Mentoring Survey

This survey is the second of 3 surveys you will receive as part of the Mentoring Program. This survey addresses how the mentoring relationship is going.

1. You and your mentor have established a process for addressing the needs specified on your application.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

2. You and your mentor have established regular touch point meetings.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

3. You and your mentor are committed following the mentoring program through until completion.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

4. The feedback you are receiving from the mentor is helpful, and relevant to your specified need.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

5. The relationship with your mentor is going well.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

WiNUP Ohio Chapter Mentoring Program

6. If you disagree or strongly disagree, please provide additional information.

7. There are issues or concerns that need to be addressed by the Mentoring Committee regarding your mentor/mentee relationship

- a. Strongly Agree
- b. Agree
- c. Neutral
- d. Disagree
- e. Strongly Disagree

8. If you strongly agree or agree, please provide additional comments process.

9. If we may contact you for additional feedback, please provide your contact information below

Name: _____

Email address: _____

Audinet number: _____

Thank you for completing this survey. Please return it to jjmartin@aep.com or kdbaker@aep.com

WiNUP Ohio Chapter Mentoring Program

Program Survey

This survey is 3 of 3 surveys you will receive as part of the Mentoring Program. This survey addresses the mentoring experience overall.

1. The Mentoring Program met your needs.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

2. The Mentoring Program is one that you would recommend to others.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

3. The mentoring program should be extended to others within AEP
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

4. Regarding training – should the mentor training and mentee training be two separate training classes?
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

5. You would serve as a Mentor in the future.
 - a. Strongly Agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly Disagree

WiNUP Ohio Chapter Mentoring Program

6. What areas of improvements would you recommend for the future?

7. You would serve on the Mentoring Committee in the future.

- a. Strongly Agree
- b. Agree
- c. Neutral
- d. Disagree
- e. Strongly Disagree

8. Please provide any additional comments you would have for the Mentoring Committee

9. If we may contact you for additional feedback, please provide your contact information below

Name: _____

Email address: _____

Audinet number: _____

Thank you for your participating in the Mentoring Program. We appreciate your dedication to the effort, and its continuing success.

Please return the survey to jjmartin@aep.com or kdbaker@aep.com