



**CBA-NS SAGDA MENTORSHIP PROGRAM  
MENTOR ENROLLMENT FORM**

**Privacy note:** All information collected on this enrollment form will be held by the CBA-NS Office and will be used for the sole purpose of matching mentors and mentees. The only information that will be shared between mentors and mentees will be names and contact information.

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**Please select whether you are enrolling as a mentor or as a mentee:**

Mentor

Mentee

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**Personal Information:**

Name:

Pronouns:

Firm or organization's name:

Phone number:

Email address:

Location:

*If you are not comfortable providing the above information, please feel free to provide only your name and email address.*

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**Work Circumstances:**

Please indicate your position at your firm or organization, or your current year in law school:

Please indicate your areas of practice or interest:

Administrative Law  
Civil Litigation/ADR  
Business/Corporate Law  
Constitutional/Human Rights  
Criminal Law  
Family Law  
Intellectual Property/Privacy Law

Labour & Employment Law  
Real Property  
Public Sector/Government  
Tax  
Wills, Trusts, and Estates  
Other (please specify):



CANADIAN  
BAR ASSOCIATION  
Nova Scotia

**Do you have any particular interest or issues that you would like to address in a mentorship relationship?**

**Please indicate the capacity you are able to commit to this mentorship program (i.e. are you able to meet in-person, communicate via email or telephone, etc.)**

**Please identify any specific characteristics or qualities you would prefer in a mentor/mentee. If you belong to any other equity-deserving communities and would prefer to have a mentor/mentee who shares this identity, please indicate below.**

**Are there any firms or organizations that you would prefer not to work with due to a conflict, or for any other reason? If yes, please list them below.**