MT Educator Application

Mentoring for Teaching Mastery: Supervsion/Ethics with Carole Osborne

Personal Profile				
Name				
Address				
Phone(s)				
Email				
Website				
Social Media Accounts				
Foundation Education Profile				
School name and location where you studied massage				
Hours completed Graduation date Type of credential				
Additional Information and Comments				

Teaching Employment History

What are the last three instructional positions you have held, starting with the most recent. Please give institution, title, subject, dates and other relevant info.

1	
2.	
3.	

If you have had teacher development training of any type, please describe that here, including the dates and names of your instructors.

Additional Information and Comments

Current or Most Recent Teaching Profile

In what institution or other format are you teaching?

Is that Part-time or Full time?

What subjects are you teaching?

What subjects have you also taught at this institution?

What are your future aspirations for your teaching of therapeutic massage and bodywork?

If you have a bodywork and/or teaching resume, please feel free to add it to this application, but not as a replacement for the answers to the questions above.

Mentoring Priorities

Mentoring that enhances your teaching can be both broad and specific. Please rank with the numbers 1-11 the needs listed below. Use #1 to designate your greatest interest and need, and then continue using each number only once until all are ranked for you. Mark with a zero (0) any that are not relevant to you at this time. If these topics don't describe your needs, be sure to state them in your own words.

- ____ Knowledge of subject and organization of subject delivery
- ____ Instructional methods
- ____ General classroom management
- Feedback to and from students
- ____ Student relations issues (dual relationships, boundaries, victim/savior dynamics)
- Other ethical issues
- ____ Your feelings compromising teaching
- ____ Students' and/or administrative issues overwhelming you
- ____ Burnout, boredom, at a plateau
- ____ Financial stability and success
- ____ Other not listed here

Please attach a brief personal statement about your specific teaching mentoring needs, particularly addressing anything not covered in the categories above or specifics about any of those topics.

The Logistics

Would you prefer to meet monthly in San Diego? Yes

No

Comments:

Do you need a group that has monthly meetings online rather than in person in San Diego? (we use a very easy platform, WebEx Meetings) Yes No

Will you make a 6 month commitment to participate in your group? Yes No

If you have a group of teachers seeking mentoring, please contact Carole to discuss the possibilities of a designated group or of her traveling to your area for monthly meetings.

Acceptance of Terms

Carole will review your application to determine how she can best meet your needs. After discussion of the type and group she recommends, you will be included in an appropriate group.

By submitting this application, you agree to the following terms. Please comment below if you have questions or concerns about these agreement terms.

I understand by signing this agreement that I am committing to six months active participation in a supervision/mentoring group. My group will include as many as six educators total although most groups are 2 -4 participants. We will meet for 1.5 hours each month with Carole at a pre-determined day/time, scheduled prior to the group beginning. If I am unable to attend one of the meetings, I will contact another group member if I wish to find out what was discussed. Carole will not be conducting make-up meetings for any missed.

I will interact as desired in a closed online discussion group that Carole participates in at least once weekly.

I can schedule up to one hour of individual consultation with Carole during my 6 month program. (Additional individual sessions for mentees are available at a discounted rate.)

I will make a \$600 investment payable in full prior to program's beginning. This will give me a \$50 discount (\$550 total tuition).

OR

I will pay half of the full tuition prior to the start date, with balance due during fourth month (\$600 total tuition).

Check preferred; MasterCard, Visa and PayPal payments accepted if necessary.

If I must withdraw, I can make a request for refund stating my reason for withdrawal. In most cases, only the portion of payment unused, minus a \$100 cancellation fee, will be refunded within 30 days of withdrawal; however, each situation will be considered individually.

In order to create a safe environment for myself and others, I agree to:

- Confidentiality "what's shared here, stays here" "we have the right to be someone else outside of the group"
- non-judgment I am committed to be aware of my own judgments about myself & others and the effects of judgment on myself & others

- ➤ authenticity and honesty with myself and others
- > the right to choose how much I participate and/or process
- ➤ pay attention and be present
- respect myself and others (boundaries, touch, etc.)
- ➤ voice my feelings (or not)
- ➤ be ok with using mentor group experiences for learning
- ➤ not take things personally
- \succ offer respectful, non-invasive support → non-violence
- ➤ be patient with the learning process and my discoveries
- ➤ have permission not to be perfect
- respect personal bodily needs (bathroom, food, water, etc.)
- > honor my own and others' individual journey that has come before
- ➤ to be mindful of making assumptions and to remain open
- ➤ to bring beginner's mind to the group
- ➤ honor each others' time: prompt beginnings and endings, not waste time

Signature	Date	
		_

Please include below any additional information, questions, or concerns that you have regarding receiving mentoring and teaching supervision from Carole.