

MENTORSHIP CONTACT APPROVAL LETTER

Date:

Dear _____,

Your mentorship contract has been approved by the College Board. We will contact the Registrar to confirm that this requirement for your application for registration has been met. You will be contacted by the Newfoundland and Labrador Council of Health Professionals (NLCHP) once your registration has been approved.

Mentor: _____

Contract End Date: _____

A Mentorship Report and Rating Form must be submitted **within 14 business days of completion of the 200-hour period**, at which time it will be reviewed by the College Board.

Considerations:

Early completion of the requirements: The mentorship requirements must be completed a maximum of 6 months from the Contract Start Date (_____) **but may be completed sooner**. If you complete the requirements sooner, do not wait until the end of your anticipated deadline to submit your form.

Extension: You must request an extension of your mentorship if the requirements cannot be met by the Contract End Date (_____).

Mentorship requirements (Policy 2-50): **200 total hours**. Additional hours may be required based on recommendation of the mentor or College. Of the 200 hours:

- A minimum of **10 hours** must be spent in observation (direct or indirect) of the mentee completing client assessment or intervention.
- A minimum of **10 hours** must be spent in clinical consultation between mentor and applicant (mentee).

If you have any further questions or concerns, please do not hesitate to contact us.

Yours sincerely, CASLP-NL Secretary