



THE INDIGENOUS BARRISTERS TRUST

INDIGENOUS MENTORING

Name: _____

Tel: _____

E-mail: _____

Residential Address: _____

Place of Employment: _____

Address of Employment: _____

Do you have part/full time (if part time list what days): _____

I want a mentor from the NSW Bar because:

Expectations of mentoring scheme:

My current areas of interest in the law are:

Mentor Preference: (Female) (Male) (Either)

Signature

Date

PLEASE COMPLETE ASAP AND SEND EITHER

by email to: jdinihan@nswbar.asn.au;

by facsimile to: Jaimee Dinihan at (02) 9221 1149; or

by mail to: Jaimee Dinihan

**NSW Bar Association, Selborne Chambers
174 Phillip Street Sydney NSW 2000**

ANY QUESTIONS: send an email to Chris Ronalds SC on Ronalds@fjc.net.au