Mentoring Agreement

Communication:

Preferred method of contact and available times:

In person  __________________________________________

Email  __________________________________________

Phone  __________________________________________

Skype/Other  ______________________________________

How often will we communicate? The expected minimum is once per month.

____________________________________________________________________________________

Goals

What are the goals for the mentoring relationship?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

What are the expectations?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Both mentor and mentee agree to the following guidelines:

1. Unless otherwise specified, information shared between mentor and mentee is confidential.
2. Offer honest and open communication, free of discrimination, harassment, and romantic involvement.
3. Be open minded, respectful, and willing to provide and accept feedback.