



Mentoring Contract

Academic Year 2015-2016

IN ORDER TO PARTICIPATE IN THE ACADEMY MENTORSHIP PROGRAM, ALL MENTORS MUST AGREE TO THE GUIDELINES OUTLINED BELOW. PLEASE READ THIS MENTORING CONTRACT CAREFULLY AND INITIAL NEXT TO EACH LINE ITEM. PLEASE SIGN AND DATE.

Mentor Name: _____ **Company/ Org:** _____

I. Mentor Code of Ethics:

_____ I agree to foster a professional mentoring relationship with my students by encouraging them to pursue higher learning and vocational goals while providing access to varying points of view. I agree to present information carefully, without distortion, and give every point of view a fair hearing.

_____ I agree to foster a professional mentoring relationship by respecting the uniqueness of each of my student's backgrounds. I agree to honor the integrity of each student and influence them through encouragement, constructive criticism, and positive feedback. I agree to empower them to make "right" decisions without actually deciding for them.

_____ I agree to foster a professional mentoring relationship with my students by protecting their health and safety at all times. I will seek advice from the program coordinator if ever in doubt about the appropriateness of an event or activity. I will inform the program coordinator immediately about any persons, activities, or situations which could affect the safety or health of the students.

_____ I agree to foster a professional mentoring relationship with my students which shall not be used for private advantage or involve the students in schemes for commercial gain.

_____ I agree to foster a professional mentoring relationship with my student by conducting myself in a professional manner at all times. This includes dressing and speaking appropriately, avoiding inappropriate conversation topics, and following all school district volunteer rules.

II. Mentor Responsibilities:

_____ I commit to mentoring my students for the full duration of this academic school year. I also commit to attending all mentor meetings (see Mentor Meeting Schedule). In the event that a schedule conflict arises which cannot be rearranged, I agree to do my utmost to notify the program coordinator and my students *at least five days prior* to the scheduled meeting. I further agree to take full responsibility in rescheduling the missed meeting with my student group during school hours either on a day before the original meeting date or no later than one week after the original meeting date.

_____ I commit to arriving prepared and on time for every meeting. I agree to contact the program coordinator by phone if a situation arises which may cause me to arrive later than the scheduled meet time.

_____ I commit to communicating with my students via e-mail to confirm meetings and follow up on meetings. I agree to reply to e-mails from my students in a timely manner, and encourage my students to reply using professional e-mail etiquette. I further agree to notify the program coordinator if a student does not respond to my e-mails in a timely manner.

Mentor Signature: _____ **Date:** _____