Mentoring Agreement A

Mentor Name: ____________________________________________________
Mentee Name: ____________________________________________________
Date: ____________________

Please answer the questions below at the initial contact between mentor and mentee and complete the agreement at the bottom.

1. What are your mutual objectives for your mentoring experience?

2. What skills or knowledge will the mentor pass on to the mentee? Be specific.
3. How do you plan to achieve your mutual objectives?

4. How often and in what form will you communicate?

5. How will you determine if you have achieved the desired objectives?

We agree that anything discussed in the meetings will remain confidential unless otherwise specified.

Mentor Signature: ______________________________ Date: ______________

Mentee Signature: ______________________________ Date: