**TAP Faculty Mentor Program**

## Semester 2: Individual Mentoring Agreement for Mentees and Mentors

*Adapted from Rooney, Ida, Nolt and Ahern, 1989, and Brainerd, 1998*

This document is intended to help the mentor and mentee to establish concrete goals and regular meeting habits. Please complete the items below in as much detail as possible. Then sign the agreement and provide the TAP Leader with a hardcopy to include in the TAP Program's confidential files.

**1. Agreement**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (mentor), and I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (mentee), are entering into a mentor-mentee relationship. We both agree that we want this to be a rich, rewarding experience with most of our time together spent in substantive activities aimed at fulfilling established goals. To clarify our roles and objectives, we have noted the following features of our collaboration.

**2. Confidentiality**

The mentor-mentee relationship will often require us to discuss sensitive issues that require the utmost confidentiality. We agree that content of our discussions will be held in confidence unless they violate some higher degree of policy, law, etc.

**3. Establishing Goals**

From our discussions, we have determined the following three goals for this mentoring relationship.

|  |  |
| --- | --- |
|  | Goal |
| 1 |  |
| 2 |  |
| 3 |  |

**4. Sensitive Issues**

We acknowledge that some issues may not be appropriate for our discussions for a variety of reasons. We have spoken about any sensitive issues we may not want to discuss in future meetings. We agree that if a topic arises in the future that we do not wish to purse, we will acknowledge it as a sensitive issue and end the discussion.

**5. Regular Check-In Meetings**

Check one that best applies to your collaboration.

\_\_\_\_\_\_\_\_\_ **Option 1**: We intend to follow the suggested timeline of activities for Semester 2.

\_\_\_\_\_\_\_\_\_ **Option 2:** Beyond the Planning Meeting and Initial Check-In, we propose the following schedule of formal Check-In meetings. These meetings are subject to change, and the activities proposed may be altered to best fit our goals and the changing needs that may arise throughout the semester.

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|  |  |  |
| --- | --- | --- |
| **Option 2: Proposed Check-In Meetings** | | |
| Week of School | Proposed Day | Topic/Activity Proposed |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
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**6. Acknowledgements**

We understand that the following activities are a requirement of the TAP Mentor Program:

* **Sign this mentoring agreement that guides our work together**
* **Establish a working relationship with each other for a period of at least one academic year**

We understand that to help the TAP Mentor Program improve, it is important for us to

* **Participate in survey evaluation of the TAP Mentor Program**
* **Reflect on the program and provide honest, immediate feedback when pertinent**
* **Complete an end-of-program evaluation**
* **Pledge**
  + That we will work conscientiously together and give each full attention to the issues at hand when we meet.
  + That we will be honest and forthright in our interactions.
  + That we will keep anything that is discussed during our meetings in strict confidence.
  + That we will do our best to create a positive working relationship focused on specific goals the mentee wants/needs to accomplish.
  + That we will “let go” and “move on” and not dwell on things that seemed stumbling blocks in our relationship, but actively seek advice from third parties who may be better informed about the issues.

We understand that to make it possible for the TAP Mentor Program to publish results of the program we may be asked to

* **Sign a consent form that details the confidentiality of any information we provide.**

We agree to a *no fault conclusion* of this mentoring relationship if, for any reason, it seems appropriate. If one of us needs to terminate the relationship, we agree to abide by the decision of our partner and the TAP Leader.

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Mentee Date

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Mentor Date