MENTORING AGREEMENT
Millersville Mentoring Alliance Program

Directions: After your first meeting, fill out this agreement along with your mentor/mentee. This form is designed to assist you in establishing and defining the parameters of your mentoring relationship. Discuss the topics with each other, and complete a tentative agreement. Remember, the two of you can update and modify your agreement throughout your partnership. Once the form is complete, please return the form (or a copy of the form) to the MMAP office.

This agreement will cover the period from: ______________________ to ____________________.

Mentee: ______________________ Phone(s): _________________ Email(s): ________________
Mentor: ______________________ Phone(s): __________________ Email(s): _______________

Expectations we have of each other:

How often, when and where we’ll meet:

Beyond face-to-face meetings, other ways we’ll communicate with each other and how often:

Any limits or constraints that will affect our interaction (time constraints, travel, etc.) and how we’ll handle these:
How the mentee prefers to receive positive and constructive feedback from the mentor (direct and to the point, “sandwich approach”, privately, etc.)

Our agreement for handling confidentiality (everything discussed between us is considered confidential, or only things that are specified during our discussions):

Role of the mentee's academic advisor in our mentoring relationship:

Challenges we're likely to face and what we can do to prevent or manage these:

Other agreements, if any:

This mentoring agreement set forth is how we'll work together. We agree to commit ourselves to the mentoring initiative of the specified period and to make a good faith effort to resolve any issues that may arise between us during the term of this agreement.

Mentor’s Signature/Date

Mentee’s Signature/Date