

**MENTORING AGREEMENT**

**Mentee:** \_\_\_\_\_

**Mentor:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_

**End Date:** \_\_\_\_\_ (9 months from Start Date)

**Mentee Purpose Statement:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mentee Expectations: (5)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Mentor Expectations: (5)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Protocol;**

**Meetings to be arranged by Mentee.**

**Duration of meetings:** \_\_\_\_\_

**Frequency of meetings:** \_\_\_\_\_

**Mentee's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Mentor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\* Copy to be sent to CTAM Education Committee/Mentoring**