Mentoring Agreement A Mentor Name: Mentee Name: 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 wi	ill you communicate?	
5.	How will you determine if you have achieved the desired objectives?		
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oth	e agree that anything discussed in nerwise specified.	n the meetings will remain confide	enuai uniess
Mentor Signature:		Date:	
Mentee Signature:		Date:	