



Mentor Contract

Name: _____

Date: _____

By choosing to participate in the Adolescent Mentoring Program, I agree to:

- Follow all rules and guidelines as outlined by the program administrator, mentor training, program policies, and this contract
- Be flexible and provide the necessary support and advice to help my mentee succeed
- Make a six month commitment to being matched with my mentee
- Meet at least twelve hours per month with my mentee
- Make at least one weekly face-to-face contact with my mentee
- Obtain parent/guardian permission for all meeting times at least three days in advance, if possible
- Be on time for scheduled meetings or call my mentee at least 24 hours beforehand if I am unable to make a meeting
- Submit monthly meeting times and activities to the program case manager, and regularly and openly communicate with the program case manager as requested
- Inform the program case manager of any difficulties or areas of concern that may arise in the relationship
- Keep any information that my mentee tells me confidential except as may cause him or others harm
- Always obey traffic laws when in the presence of my mentee
- Never be in the presence of my mentee when I have or am consuming alcohol, tobacco, or controlled substances
- Participate in a closure process when that time comes
- Notify the program case manager if I have any changes in address, phone number, or employment status
- Attend in-service mentor training sessions as needed

_____ (please initial) I understand that upon match closure, future contact with my mentee is beyond the scope of the Adolescent Mentoring Program and may happen only by the mutual consensus of the mentor, the mentee, and parent/guardian.

I agree to follow all the above stipulations of this program as well as any other conditions as instructed by the program administrator at this time or in the future.

Signature

Date