APDPro Mentor Program
Mentoring Agreement

Mentee’s Name: ____________________________ Mentor’s Name: ____________________________

We are both voluntarily entering into this mentoring relationship. We wish for this to be a rewarding experience for both parties and will spend our time discussing educational, professional, career development activities and other information consistent with the purposes of the program.

We both agree on the following intentions which will guide our mentoring relationship:

1. For program purposes, the formal mentoring relationship between mentor and mentee is terminated when: (1) the mentor or mentee requests to withdraw from the relationship; (2) the mentee graduates; and/or (3) the mentee is no longer an enrolled student at Kansas State University. The APDPro Mentor Program office (785-532-2846, apdpro@ksu.edu) should be notified immediately of any requests to withdraw and changes in an individual’s status.

2. We will meet (circle one): Weekly / Bi-weekly / Monthly / Other ________________ by phone / video chat / in-person. Meeting times, once agreed upon, should not be cancelled unless this is unavoidable. At the end of each meeting, we will set a date for the next meeting.

3. In between meetings, we may contact each other by (circle all that apply) phone / email / text with ________________ being the preferred method. We will always do our best to respond to any communication from our mentoring partner in a timely manner.

4. The role of the mentor is to:
   a. Further the student’s development of their interpersonal and communication skills;
   b. Expand the student’s career-based knowledge and awareness of professional opportunities; and
   c. Assist the student in building their professional network.

5. The role of the mentee is to:
   a. Initiate regular communication with the mentor (monthly minimum);
   b. Come prepared to meetings with questions and topics of conversation; and
   c. Seek opportunities for professional growth.

6. The mentor agrees to be honest and provide constructive feedback to the mentee. The mentee agrees to be open to the feedback and to also be honest.

7. We agree on the following additional terms of this mentoring relationship (optional):

   ____________________________________________
   ____________________________________________
   ____________________________________________
   ____________________________________________

Mentee’s Signature__________________________ Date________________

Mentor’s Signature__________________________ Date________________

Updated 10/2015