MENTORING ***CONTRACT***

**This agreement is made on** [Date] **between:**

**Mentor:** [Mentor’s Name]
**Mentee:** [Mentee’s Name]

**Purpose:**
This contract establishes a mentoring relationship between the Mentor and Mentee to support the professional development of the Mentee.

**1. Responsibilities of the Mentor:**

* Provide guidance, support, and constructive feedback.
* Share relevant experience, knowledge, and resources.
* Be available for scheduled meetings and discussions.
* Reasonable notice must be given to the mentor if unable to attend a meeting via email / text
* Foster a supportive and respectful environment.
* Encourage the Mentee’s growth and independence.

**2. Responsibilities of the Mentee:**

* Be proactive in seeking guidance and feedback.
* Attend scheduled meetings and respect agreed-upon timelines.
* Notice must be given to the mentor if unable to attend a meeting via email / text
* Respond promptly to communications
* Demonstrate commitment to personal and professional growth.
* Be open to constructive criticism and apply learnings.
* Respect the Mentor’s time and expertise.

**3. Meeting Schedule:**

* Frequency: To meet a minimum of 4-6 times over 4-6 months
* Duration: Meetings will be up to one hour

**4. Communication in between meetings**

Limits- and method (To be agreed) (text / email / Phone) during office hours / after work

**5. Confidentiality:**
Both parties agree to maintain confidentiality regarding shared discussions, personal or professional matters, and sensitive information unless the mentor is worried for the wellbeing of the mentee.

**6. Duration and Review:**
This agreement will be in effect from [Start Date] to [End Date] and can be reviewed or amended as needed.

**7. Termination of Agreement:**
Either party may terminate this agreement with reasonable notice if the mentoring relationship is no longer beneficial or feasible. This must be communicated with Alison Zorraquin azorraquin@aub.ac.uk and Vicky-Nenya Uzzell vnenyauzzell@aub.ac.uk

**8. Acknowledgment and Agreement:**
By signing below, both parties acknowledge and agree to the terms outlined in this contract.

**Mentor’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Mentee’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please keep a copy for your records and send a copy to azorraquin@aub.ac.uk