

Neuroscience Scholars Program Mentoring Agreement Form

We are both voluntarily entering into this partnership. We wish this to be a rewarding experience, spending most of our time discussing developmental activities. We agree that...

1. The mentoring relationship will last for _____ months. This period will be evaluated every six months and will end by amicable agreement once we have achieved as much as possible.
2. We will meet at least once every _____ weeks. Meeting times, once agreed, should not be cancelled unless this is unavoidable. At the end of each meeting we will agree a date for the next meeting.
3. Each meeting will last a minimum of _____ minutes and a maximum of - _____ minutes.
4. In between meetings we will contact each other by telephone/email no more than once every _____ weeks/days.
5. The aim of the partnership is to discuss and resolve the following issues:
 - a)
 - b)
 - c)
6. We agree that the role of the mentor is to:

7. We agree that the role of the mentee is to:

8. We agree to keep the content of these meetings confidential.
9. The mentor agrees to be honest and provide constructive feedback to the mentee. The mentee agrees to be open to the feedback.

Mentor's Name (PRINT): _____

Mentor's signature: _____

Mentee's Name (PRINT): _____

Mentee's signature: _____

Date: _____