

Mentorship Agreement

1. Check the topics you will address in mentoring sessions.

- | | |
|--|---|
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Additional Mentors |
| <input type="checkbox"/> Research | <input type="checkbox"/> Self Development |
| <input type="checkbox"/> Clinical Care | <input type="checkbox"/> Networking |
| <input type="checkbox"/> Service | <input type="checkbox"/> Work/Life Balance |

2. Check the frequency of meetings for this year.

- | | | |
|----------------------------------|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Bi-monthly | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly | |

The Administrative Assistant responsible for scheduling meeting is: _____

The Administrative Assistant phone number is: _____

3. Information provided by mentee prior to each meeting.

- None
- Updated CV (with highlight of new additions)
- Narrative of each topic to be discussed
- Mentoring Worksheet
- Other

4. Please review, discuss, edit and check the expectations for this mentoring relationship

Responsibilities of Mentor:

- Provide assessment and feedback regarding accomplishments in each topic area and help plan "next steps"
- Emotional Support
- Advocacy
- Actively address any problems with mentorship relationship
- Help set priorities to achieve academic advancement
- Encourage creativity and broader thinking

Other (please specify) _____

Responsibilities of Mentee:

- Understand the academic series; review career with Department Chair annually and with the Associate Dean of Academic Personnel, when needed
- Provide goals and updates
- Actively address any problems with mentorship relationship
- Other (please specify) _____

5. If mentorship relationship not working, we will discuss with Departmental Director of Faculty Development and seek guidance and resolution.

Mentor, Signature: _____

Mentee, Signature: _____

Date: _____

Date: _____