

# Template Mentoring Partnership Agreement

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**We have agreed on the following goals and objectives as the focus of this mentoring relationship:**

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We have discussed the protocols by which we will work together in partnership and collaborate on the development of a work plan. In order to ensure that our relationship is a mutually rewarding and satisfying experience for both of us, we agree to:

**1. Meet regularly.**

We agree that our specific schedule of contact and meeting, including additional meetings, is as follows: \_\_\_\_\_

**2. Look for multiple opportunities and experiences to enhance the mentee's learning.**

We agree to the following specific opportunities and venues for learning:

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**3. Maintain confidentiality of our relationship.**

We agree that confidentiality encompasses:

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**4. Honour the ground rules we have developed for the relationship.**

We agree the ground rules as:

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**5. Provide regular feedback to each other and evaluate progress.**

We agree to accomplish this by:

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We agree to meet regularly until we accomplish our predefined goals or for a maximum of [specify timeframe]. \_\_\_\_\_ At the end of this time, we will review this Agreement, evaluate our progress and reach a learning conclusion. Once we have agreed on this, the relationship will be considered complete.

However, if we choose to continue the mentoring partnership, we may negotiate a basis for continuation, as long as we have stipulated mutually agreed terms and goals.

In the event that one of us believes the relationship is no longer productive or the learning situation is compromised, we may decide to seek outside intervention or conclude the relationship. In this event, we agree to use closure as a learning opportunity.

\_\_\_\_\_  
Mentor's signature  
Date: \_\_\_\_\_

\_\_\_\_\_  
Mentee's Signature  
Date: \_\_\_\_\_

**Mentee Establishing Goals  
(Completed by the Mentee)**

Please provide information and insight regarding the mentoring program you have participated in by answering the following questions related to the year's activities and the nature of the mentoring process.

Mentee's Name:

Mentor's Name:  
(Optional)

Year:

**Questions:**

- What are your short term goals?
- What are your long term goals
- Are your goals quantifiable? How will you measure success?
- Do you have an action plan?
- Suggest a timeline for achieving your goals?

1. Year

1: \_\_\_\_\_  
\_\_\_\_\_

2. Year

2: \_\_\_\_\_  
\_\_\_\_\_

3. Year

3: \_\_\_\_\_  
\_\_\_\_\_

- What is your completion date?
- Are your goals realistic in light of your timeline and completion date proposal?
- How do you envision working with your mentor to plan your progress and review your achievements?

# Mentoring Action Plan Worksheet

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**Name:** \_\_\_\_\_

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

**Career Goal:** \_\_\_\_\_

<b>Knowledge to Gain/Skills to Build/Attitudes to Develop to Accomplish my Career Goal.</b> <i>(What must I acquire/improve?)</i>	<b>Projected Outcome</b> <i>(How will I know I did it?)</i>	<b>Action Steps</b> <i>(How will I actually gain/build/develop these?)</i>	<b>Resources Needed</b> <i>(Besides the help of my mentor, I will need what?)</i>	<b>Target Completion Date</b> <i>(When will I be there?)</i>

# Periodic Mentoring Partnership Review

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Over time the nature of the mentoring relationship may alter and support needs could change. Therefore it is valuable for a mentor and mentee, **together**, to review the process of the relationship at appropriate points and make any adjustments as necessary to the way they work together and the type of support provided.

As you sit down together, here is a list of some questions that might be useful in this process:

- How is the mentoring partnership working?
- What is working well?
- What, if anything, is working not as well as you had hoped?
- What are you both gaining from your experience of the process?
- What does your mentee appreciate about the support the mentor is providing?
- What additional support might the mentee welcome?
- What external constraints or difficulties are affecting the partnership? How might these be resolved?
- What changes might be helpful to make in the way the program or either party operates within its expectations?

**MENTOR FINAL EVALUATION**

**Mentor** \_\_\_\_\_ **Contact Number** \_\_\_\_\_

**Employer** \_\_\_\_\_ **Job Title** \_\_\_\_\_

**Number of Mentor Contacts with Mentee** \_\_\_\_\_ **Type of Contacts** \_\_\_\_\_

**Mentee** \_\_\_\_\_ **Contact Number** \_\_\_\_\_

**Overall, how would you rate the mentoring experience?**  
**5 – Excellent 4- Good 3 – Satisfactory 2- Fair 1- Poor**

**Comments:** \_\_\_\_\_  
\_\_\_\_\_

**Rate the following statements on the scale of 1 - 5.**  
**5 - Strongly agree 4 - Agree 3 - Disagree 2 - Strongly Disagree 1 - Don't Know**

I feel that the mentee reached all or some of his/her goals for personal growth. \_\_\_\_\_

I feel better about his/her potential for professional growth since completing the DWIA training and mentoring program. \_\_\_\_\_

I see in the mentee a greater self-confidence since we began the mentoring relationship. \_\_\_\_\_

I feel I played an important part in the career and personal development of the mentee. \_\_\_\_\_

I think the mentee will become a long-term productive employee. \_\_\_\_\_

I feel that I have gained from the mentoring relationship. \_\_\_\_\_

I would encourage others to serve as mentors. \_\_\_\_\_

I would like to mentor others in the future. \_\_\_\_\_

I found the mentor role to be too demanding. \_\_\_\_\_

My mentee and I plan to continue our relationship. Yes \_\_\_ No \_\_\_ Don't Know \_\_\_

\_\_\_\_\_  
**Mentor's Signature and Date**

## MENTEE FINAL EVALUATION

Mentee \_\_\_\_\_ Mentor \_\_\_\_\_

Mentor Title \_\_\_\_\_ Phone \_\_\_\_\_

Number of Mentee Contacts with Mentor \_\_\_\_\_ Type of Contacts \_\_\_\_\_

Overall, how would you rate the mentoring experience?

5 – Excellent    4- Good    3 – Satisfactory    2- Fair    1- Poor

Comments: \_\_\_\_\_

\_\_\_\_\_

Rate the following statements on the scale of 1 - 5.

5 - Strongly agree    4 - Agree    3 - Disagree    2 - Strongly Disagree    1 - Don't Know

I feel that I have reached all or some of my goals for personal growth. \_\_\_\_\_

I feel better about my potential for career and personal growth since completing the DWIA training and mentoring program. \_\_\_\_\_

I feel more self-confident since completing the DWIA program. \_\_\_\_\_

My mentor played an important part in my growth and development. \_\_\_\_\_

I plan to continue my training and education. \_\_\_\_\_

I plan to continue to work on reaching current and future career goals. \_\_\_\_\_

I feel the training I received had a positive effect on my career success. \_\_\_\_\_

I would recommend this program to others. \_\_\_\_\_

My mentor and I plan to continue our relationship. Yes \_\_\_ No \_\_\_ Don't Know \_\_\_

I would like to serve as mentor in the future. Yes \_\_\_ No \_\_\_ Don't Know \_\_\_

\_\_\_\_\_

Mentee Signature and Date