**2017 YOUNG ALUMNI MENTORS
MENTORING AGREEMENT**

**Mentee Name:
Mentor Name:**

Exchange contact information (cell phone #’s, emails, etc)

What type of help/advice does the mentee want from the mentor?

What expectations does the mentor have of the mentee (showing up for meetings, timeframe for returning emails)?

What expectations does the mentee have of the mentor (amount of contact, topics for conversations)?

How often will you meet (program requirements are 1x per month MINIMUM)?

Where and when will you meet? For how long?

Who will be responsible for scheduling the meetings?

We have agreed that our initial meetings will focus on these three topics:

1.

2.

3.

**SMART Goal Setting**

**MENTEE Name
MENTOR Name**

Write down your goal.

Fill in the following table to show how your goals meets the SMART criteria.

|  |  |  |  |
| --- | --- | --- | --- |
| **Is it…?** | **Yes** | **No** | **Explain** |
| Specific |  |  |  |
| Measurable |  |  |  |
| Attainable |  |  |  |
| Relevant |  |  |  |
| Time-limited |  |  |  |

What will be your reward when you reach the goal? In other words, how will reaching the goal benefit you?

What actions do you need to take to reach your goal? For example, do you need to gather information, obtain money, learn new skills, or make special arrangements? How much time will you need to accomplish each action? When should you have completed each action?

|  |  |  |
| --- | --- | --- |
| **ACTION** | **ESTIMATED TIME** | **DUE DATE** |
|  |  |  |
|  |  |  |
|  |  |  |