



2015-2016 Northern Illinois University Alumni Mentoring Program
MENTOR AND MENTEE AGREEMENT

This agreement was developed by on _____ and represents our mutually agreed upon mentorship. Date

By creating and signing this agreement we are all committing to do our best to maintain a professional working relationship during the 2015-2016 academic year.

We agree to the following:

- Communicate at least _____ times per _____ (i.e. week, month, etc) via _____ (i.e. email, telephone, etc).
Meet at least _____ times per _____ (i.e. week, month, etc).
Opportunity for mentee(s) to shadow mentor(s) for a day at a place of work? Yes No
Keep open lines of communication and discuss any and all issues that may arise during this mentor/mentee relationship.
Come to a meeting prepared with an open mind and a positive attitude.
Pick appropriate meeting places such as NIU campuses, place of work or other appropriate public venue.
In the event of a scheduling conflict, give at least 24 hours notice to cancel (if necessary) or reschedule a meeting.
Do not bring along friends, family members, or co-workers to individual meetings unless discussed and agreed upon in advance.
Maintain confidentiality unless a mentor or mentee suspects an unsafe situation.
Respect and value each other's differences and the mentor/mentee relationship.
Students will notify the Office of Career Services in the event of communication difficulties.
Alumni will notify the NIU Alumni Association in the event of communication difficulties.

Also, I understand that:

- At no time is inappropriate physical contact permitted
I can be reassigned to another mentee at anytime
If I feel uncomfortable at any time, I can withdraw from the program

Additional agreed upon expectations:

Four horizontal lines for writing additional expectations.

Mentor Name (Print) Mentor Signature Date

Mentee Name (Print) Mentee Signature Date