



3.11 Mentoring Contract

We are both voluntarily entering into a mentoring relationship which we expect will benefit both of us and the doctoral project of **Linda Macera-DiClemente and Connie Smith in association with the Michigan Health Council/Michigan Nursing Coalition.** We want this to be a rewarding experience, with most of our time to be spent on developmental activities. The following are mutually agreed upon terms.

1. The mentoring relationship will last approximately _____. After an initial period, it will be mutually agreed to end or to continue.
2. The two of us will meet _____ (frequency).
3. Between meetings, we will contact each other by phone or e-mail.
4. We agree that the role of the mentor and the role of the mentee are as discussed on the Definition of a Mentor Worksheet in Section 3.
5. We agree to be trustworthy, respectful and supportive of each other and to communicate effectively with each other.
6. We agree that if the relationship is no longer productive to us that we will respectfully end it and attribute no fault to either of us. **To end the relationship please contact Linda Macera-DiClemente at lmacera@jacksonville.edu 248-821-9571 or Connie Smith at csmith97@jacksonville.edu 989-227-8780**

Mentee's Signature/Date

Mentor's Signature/Date

Complete, sign and make three copies (mentor, mentee, mentor coordinator).