

**STATEMENT OF UNDERSTANDING  
Mentoring Program**

(To be filled out after initial meeting and a copy filed in Mentor/Mentee's professional development file at the Center for Professional Development & Mentoring)

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

Mentor: \_\_\_\_\_

Mentee: \_\_\_\_\_

We are entering into a mentoring relationship which we expect to be mutually beneficial. We agree to the following considerations regarding, confidentiality, time commitments, communication efforts and expectations.

**1. Expectations/Conduct:** *(Will be unique to each relationship – modify as appropriate)*

**Mentee:** I expect my Mentor to guide me in my professional development. This may include suggestions for training, education, resume preparation, coaching and assisting me in ways that will contribute to the progression of my career mission statement as developed with the CareeRxel program, (provided by the Center for Professional Development & Mentoring). I will be mindful of my Mentor's time and commitment to my progress. I hope to gain insight from my Mentor's expertise and knowledge within the Nursing profession.

**Additional comments:**

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**Mentor:** I expect my Mentee to be committed to actively participate in their professional development. I will commit to act in my Mentee's best interest with diplomacy and patience for the professional development process. I will not make decisions for my Mentee, but will strive to assist in the decision making process by providing knowledge I've gained within the Nursing profession. I will strive to include my Mentee in networking opportunities and to knowledge-building events as appropriate.

**Additional comments:**

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**2. Confidentiality:**

We will treat all communications as confidential, unless we agree otherwise.

**3. Length of Mentoring Relationship:**

Indicate how many months or under what terms the mentoring opportunity will conclude.

*Guidelines:*

Every relationship will have different time requirements. Use the objectives and the expectations discussed in your initial meeting to frame what you expect a reasonable time frame may be.

A student may want to focus on a semester based term; a practicing nurse may prefer a six month or longer commitment. The time availability of the Mentor is a consideration as is the nature of work. A research mentorship may require only a month or two. At the end of any agreed upon term, it is acceptable to agree to a continuation or a renewal period.

We agree to this time period: \_\_\_\_\_

**4. Communication and Meetings:**

Indicate a planned meeting or communication schedule. Include weekly or monthly checkpoints and in what format the communication will occur: face-to-face, phone calls or e-mail. The following is a suggested format in which you may fill in the blanks, or you may develop your own parameters as appropriate.

We will strive to meet: \_\_\_\_\_

Additionally, we will connect by phone and/or E-mail, based on the following schedule:

\_\_\_\_\_

**5. Termination of Relationship:**

Either of us may terminate the relationship at any time. We will agree to discuss our decision to terminate with the Center for Professional Development & Mentoring Career Coach/Mentoring Coordinator.

**6. Goals:**

Using the Mentee's prepared career mission statement, (developed via the CareeRxel program), and subsequent action items along with and incorporating the Mentors area of expertise and knowledge: indicate goals that were discussed during the initial meeting.

We discussed the following objectives and goals for our mentoring relationship:

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**Mentor signature**

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**Mentee signature**