

Mentor Agreement Letter

Dear _____,

Thank you for accepting the task of mentoring _____ through his/her Senior Project. As outlined in an earlier invitation, the requirements of the mentor are the following:

- Be a community member who is willing to work with a high school student on a regular basis for a minimum of 15 hours. **Students may not work with their mentor during regular school hours.** *Travel time and/or practicing are not part of the 15 hour requirement.*
- Have expertise or certification in the student's area of interest. In some cases, legal documentation may be required.
- Be at least a 21 year old adult who is not a relative, household member, or employer of the student.
- Apply for a criminal background check with the Attorney General's Office (if necessary)
- Help with the research paper, if possible, by providing information through a personal interview and/or identifying sources of information for the student's research.
- Help with the product by
 - Providing instruction.
 - Assisting with resources (not monetary).
 - Offering support and guidance.
 - Encouraging the student to achieve to his/her maximum learning potential.
 - Confirming the completion of the required hours.
 - Verifying that the student completed or substantially completed his/her product.
 - Writing a mentor evaluation regarding the student's performance.
- Be available to help the student complete the fieldwork so that he/she may successfully complete their project by the required deadline. Most fieldwork takes place from January until May.

Students are not allowed to begin their fieldwork, which includes working with their mentor on their project, before receiving approval of their project from the Senior Project Review Board. Your mentee's project, which cannot be approved by the Senior Project Review Board without this completed and signed Mentor Agreement Letter, involves the following:

Project Topic: _____

Product: _____

How your mentee will document the process of creating his/her product:

Please provide the information requested below. Your mentee is responsible for bringing the completed form to the school as soon as possible.

Name _____ Occupation _____

Business Address _____

City/State/ Zip Code _____

Day Phone _____ E-mail Address* _____

**Please provide an e-mail address if you have one. It will enable us to communicate with you individually regarding your mentee and to send information to all mentors through an e-mail list serve.*

I understand my role as a mentor and agree to serve as a mentor to _____.

I am at least 21 years old, am not a relative, household member, or employer of this student.

I confirm that the information I have provided is accurate.

Mentor Signature _____ Date _____

The role of the mentor is crucial to the success of the Senior Project. Without volunteers like you, this valuable endeavor would not be possible. We hope and expect that the experiences between you and your mentee will be worthwhile and rewarding for both of you.

Sincerely,

John M. O'Brien
Graduation by Proficiency Coordinator
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