



Mentor Confidentiality Agreement

A successful mentor-mentee partnership is based on trust, honesty, and confidentiality. This agreement requires both mentor and mentee to engage in open and honest communication while respecting each other's confidential information.

My Agreement:

- All monthly communication records, reports, and other materials containing personal information are subject to secure record keeping procedures.
- If you witness a situation that may potentially cause harm to your mentee or others, provide your mentee with helpful resources and contact information. Check in with your mentee to ensure this has been followed through and you are updated as quickly as possible on the outcome.
- You will not refer to your mentee by name or share identifying characteristics in the course of discussion with other people or in meetings.
- Any involvement beyond the mentor-mentee relationship as outlined is considered inappropriate during the one-year term of mentorship.

I have read and understand the confidentiality agreement. I will honor it during the mentorship relationship and also after my role had ended.

Name of Mentor: _____

Signature of Mentor: _____ Date Signed: _____

Mentor Program Expectation Agreement

By choosing to participate in Transformation Change provincial mentorship program, I agree to follow all rule, guidelines, and program policies outlined within this agreement.

I understand that I must...

- Follow the rules and responsibilities .
- Report any communication issues to the Mentorship Coordinator Dr Rodney Coles Sr
- Commit to the mentorship program for one year
- Respect the mentee and the program by giving at least one month's notice if you must end the relationship before the one-year term, during which time you would participate in a transition process with the mentee and their new mentor
- Notify the Mentorship Coordinator if you have any changes in address, phone number or significant change in your life that hinders the continuation of the mentorship relationship
- Participate in a closure process

I agree to follow all of the above stipulations of this program expectation agreement.

Name of Mentor: _____

Signature of Mentor: _____ Date Signed: _____