## **Mentor Contract**

Name:	Date:
By cho	osing to participate in the Boys Mentorship Programme, I agree to:
>	Follow all rules and guidelines as outlined by the program coordinator, mentor training, program policies, and this contract
>	Be flexible and provide the necessary support and advice to help my mentee succeed
>	Make a one-year commitment to being matched with my mentee
>	Meet up to eight hours per month with my mentee
>	Make at least weekly contact with my mentee
>	Obtain parent/guardian permission for all meeting times at least three days in advance, if possible
>	Be on time for scheduled meetings or call my mentee at least 24 hours beforehand if I am unable to make a meeting
>	Submit monthly meeting times and activities to the program coordinator, and regularly and openly communicate with the program coordinator as requested
>	Inform the program coordinator of any difficulties or areas of concern that may arise in the relationship
>	Keep any information that my mentee tells me confidential except as may cause him or others harm
>	Always obey traffic laws when in the presence of my mentee and keep a copy of his/her health insurance coverage in the automobile at all times when traveling together
>	Never be in the presence of my mentee when I have or am consuming alcohol, tobacco, or controlled substances
>	Participate in a closure process when that time comes
>	Notify the program coordinator if I have any changes in address, phone number, or employment status
>	Attend in service mentor training sessions twice per year
-	(please initial) I understand that upon match closure, future contact with entee is beyond the scope of the Boys Mentorship Programme and may happen only by utual consensus of the mentor, the mentee, and parent/guardian.
_	e to follow all the above stipulations of this program as well as any other conditions as sted by the program coordinator at this time or in the future.

(Date)

(Signature)