UNC CHARLOTTE NEW FACULTY
MENTORING PROGRAM
Mentee-Mentor Agreement

I, ________________________________, agree to meet with my mentee, ________________________________, ________ time(s) per semester and to otherwise be in communication ____ time(s) per month. In addition, I agree to:

☐ Provide career and possibly lifestyle advice to my mentee
☐ Keep confidence between the two of us
☐ Follow through on commitments
☐ Be considerate while giving honest feedback
☐ Agree to terminate the contract at any time, with no fault attached, if necessary

☐ ________________________________
☐ ________________________________
☐ ________________________________
☐ ________________________________
☐ ________________________________

Signed,

_________________________________  ________________________________
Mentor                                      Date

_________________________________  ________________________________
Mentee                                      Date

Please complete this form during your first mentee-mentor contact and return one copy to Yvette Huet by email to: Mentoring@uncc.edu or by interoffice mail to: ADVANCE Faculty Affairs and Diversity Office, Cameron 266.