

**THE MENTORING AND LEADERSHIP DEVELOPMENT INSTITUTE**

**MENTEE/PARENT CONTRACT**

I, \_\_\_\_\_, agree to participate in TMALDI. I understand that the mentor is a volunteer who wants to help me to be a success in school and in life and will act as a friend, advisor, and role model. I also understand that no monetary assistance is provided by the mentor.

I understand that the mentor agrees, for one year, to meet with me at least (frequency of contact, i.e., once per week, twice a month)\_\_\_\_\_.

In return, I agree to:

- Try hard to have a good relationship with the mentor;
- Keep all appointments with my mentor;
- Notify my mentor if I cannot keep an appointment with him/her for any reason;
- Respect the guidelines set by my mentor;
- Attend all required program activities;
- Abide by the rules and regulations of the program;
- Communicate with the program coordinator if I feel uncomfortable or experience problems at any time during the program; and
- Fill out a survey at the end of the year.

I understand that if I miss three mentoring sessions I may lose the privilege of participating with TMALDI.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Mentee Signature

\_\_\_\_\_  
Date