

**Mentorship Program**

***Mentoring Partnership Agreement***

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Agreements are due to Project Coordinator, Peyton Purcell, by October 5, 2011***

***NOTE: This is a SAMPLE. Each partnership should tailor/add to the agreement as appropriate.***

|  |  |  |
| --- | --- | --- |
|  | **Name** | **Organization Contact Info (address, phone, email, etc.)** |
| **Mentee** | Charlene Cariou | St. Luke’s Mountain States Tumor Institute  1118 NW 16th Street, Suite D  Fruitland, Idaho 83619  Phone: 208-452-8744  Cell: 714-272-3254  Email: [cariouc@slhs.org](mailto:cariouc@slhs.org) |
| **Mentor** | Hope Krebill | Midwest Cancer Alliance  Phone: 913-588-3739  Email: [hkrebill@kumc.edu](mailto:hkrebill@kumc.edu) |

The purpose of this agreement is to document your mentoring partnership. This partnership is entered into voluntarily with the understanding that it will be mutually beneficial. Participants agree to the following terms and conditions:

1. **Goals for the partnership (measurable targets)**

|  |  |
| --- | --- |
| **Goals and Objectives for Partnership:** | **Measurable By:** |
| **Increased knowledge/skill in real world program development and implementation.** | **Development and implementation of new sun safety/skin cancer screening program in rural Idaho.**  **Development of program planning toolkit to be utilized for future programs.**  **Sharing of program planning toolkit to coworkers and other public health professionals.** |
| **Increased knowledge/skill in real world community engagement, partnership building and collaboration for program development and implementation.** | **Asset map of focus area completed.**  **Development and implementation of new sun safety/skin cancer screening program in rural Idaho in partnership with community organizations and individuals.** |
| **Increased ability to develop and implement culturally relevant and sensitive programs.** | **Development and implementation of new sun safety/skin cancer screening program that is culturally target to meet the needs of individuals living in rural Idaho.** |

1. **Duration of Formal Relationship [NCI Requirement]**
2. The formal mentoring partnership is for one-year. However, there is an additional sixth-month period for completion of deliverables and evaluation, in which the partnership will continue, as needed. Mentorship relationship may be modified as needed for this additional six-month period.
3. **Communication – Frequency and Types**

As a participant in the Research to Reality Mentorship Program, NCI has set expectations that, on average, mentees will contribute 8 hours per week, and mentors will allot 1-2 hours per week, including regular communications. Please indicate how your mentorship pair intends to communicate with one another.

1. The preferred mode of primary communication is R2R website/discussion boards, phone and email .
2. It may be useful to set a bi-weekly/monthly call for discussion. Frequency of calls will be determined by needs of program development. At a minimum, calls will occur every 2-4 weeks with a future call always planned.
3. Mentee will share meeting goals and agenda with the mentor in preparation for each call using meeting minutes and R2R discussion posts.
4. Emails/Calls are best done during the mornings (10am MST/11am CST).
5. Both parties should be expected to respond within 48 hours during the work week unless advance notice is given that they will be out of the office and unable to respond. Phone calls/texts will be utilized for urgent requests/questions.
6. **Program Commitments and Expectations [NCI Requirement]**

This is a professional program. NCI expects all participants to act in an appropriate and professional manner.

1. Participants will respect each other’s time and effort.
2. Participants will come prepared to each meeting and focus on the established goals.
3. Participants will follow-up on any agreed upon action items.
4. Mentor will identify opportunities to enhance learning, development, and assist the mentee in reaching his/her full potential.
5. Mentor will conduct a site visit to the mentee’s organization within the first three months of the Program.
6. If there is a conflict or issue between the mentee and mentor, the pair will contact the NCI Program Coordinator as soon as possible and participate in a facilitated discussion as needed to resolve the issue.

Ending the Mentoring Relationship

This program is intended to, in part, build relationships and the capacity for partnerships. As such, NCI expects the participants will try to resolve any conflicts professionally, with the help of the NCI Program Coordinator. However, NCI acknowledges that there are situations in which the relationship may need to be ended. If that is the case, participants agree to contact the NCI Program Coordinator prior to terminating the partnership. Such a decision shall be communicated and received in a professional and courteous manner. Mentees will still be responsible for program deliverables as a participant in this program.

I have read and agreed to the above Mentorship Agreement Form:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

          Mentor Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mentee Date

*Note: This agreement will be shared with the program coordinator for the sole purpose of ensuring compliance.*