

## MENTORSHIP AGREEMENT

1. Participation in the Physician Mentoring Program is a commitment that can be broken at any time by any party if the relationship is not working. If problems arise, please contact the Director of Mentorship in the Department of Medicine.
2. We (the mentor(s) and the mentee) agree to meet formally for at least 1-2 hours, twice per year. After the initial meeting, the mentee will be responsible for setting up the date/time and location of all future meetings.
3. We (the mentor(s) and the mentee) agree to meet or speak informally as often as is mutually felt to be required either to deal with ad hoc issues that may arise or to ensure that agreed actions progress at the desired rate.
4. This is a confidential relationship. The mentor(s) will not discuss the mentee's personal issues with others (or vice versa), unless both parties agree that sharing personal information with a third party would be beneficial. (e.g. speaking with the Mentorship Director, the Department Chair/Vice Chair or the Division Head for purposes of time assignments, committee nominations, networking, etc.)
5. We (the mentor(s) and the mentee) will do our best to develop our mentoring relationship through honest conversation, to guide and receive feedback, to develop goals and to foster knowledge and skills to reach the goals.
6. We (the mentor(s) and the mentee) will meet at the specified meeting intervals and the mentee will complete the Meeting Confirmation Report form. The mentee will return this form to the mentorship office within the Department of Medicine within 2 weeks of each formal meeting.
7. The mentee will return a copy of this signed mentoring agreement following the first meeting whilst ensuring all parties retain a copy for their own records.

Mentor: \_\_\_\_\_

Mentor: \_\_\_\_\_

Mentee: \_\_\_\_\_

Date: \_\_\_\_\_