Please email to mentorship@hli.ubc.ca once completed

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| **Mentoring Agreement** |
| Mentor |  |
| Mentee |  |
| *Purpose and desired outcomes of the mentoring relationship:**Activities to be conducted:**Expectations:**Communication methods and frequency:*I agree to enter this mentoring relationship as defined above and will maintain confidentiality |
| Mentee | Mentor |
| Date | Date |