

National / Henry County PAL Mentoring Agreement



Mentor Signature		Date
	impact my working with youth.	, zazna zana ziak wodi
	I will notify PAL staff if anything has changed o	on my background status that would
	I will notify and discuss with PAL staff any thoughts that I have of terminating my relationship with my mentee prior to discussing these with the mentee and/his/her family.	
	I will notify PAL of any changes in my employment, address, phone number, e-mail address, etc.	
	I will keep all information regarding my ments in the strictest confidence.	ee and my relationship with him/he
	I will seek and/or accept guidance and advice	e from PAL staff as appropriate.
	I will notify PAL promptly if I am unable to kee my mentee.	ep a scheduled meeting with
	I will be punctual for all scheduled meetings	with my mentee and PAL personne
	I will abide all terms of my relationship with nour plan of work.	ny mentee as may be described in
	I will complete my term of service with my me	entee to the best of my ability.
	I will attend a mentoring orientation meeting	prior to beginning as a mentor.
(Prin	ted Name of Mentor)	
		(please initial each of the following