### Meeting Schedule

Responsibility for setting meetings: ____________________________

Frequency and duration: ____________________________

How will schedule conflicts be managed? ____________________________

### SMART Goals

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________________________

________________________

________________________

### Partnership expectations

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________________________

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### Ground Rules (e.g. confidentiality, respect, communication tools)

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### Communicating Feedback Guidelines

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________________________

We agree to honor the agreement as outlined above and will assess our progress at the program mid-point (January), as well as at the scheduled conclusion of the partnership.

Mentor Signature ____________________________ Date ____________

Student Signature ____________________________ Date ____________