

Specialist Refresher Program Mentoring Learning Agreement



Participants in the refresher program should identify their learning goals and discuss with their Mentor. This form should then be completed and signed by both the refresher participant (Mentee) and the Mentor. If insufficient space is provided in any of the sections below, please attach separate sheets.

Name of Mentee:	Name of Mentor:
------------------------	------------------------

PURPOSE

The purpose of the Mentoring Partnership is:

EXPECTATIONS

*Our shared expectations of the **Mentor** are:*

*Our shared expectations of the **Mentee** are:*

PARTNERSHIP COMMUNICATIONS

We plan to use the following methods to undertaking our mentoring activities (communication methods, frequency of communication, location and duration)

Specialist Refresher Program

Mentoring Learning Agreement



PARTNERSHIP CONFIDENTIALITY and BOUNDARIES OF DISCUSSION

We understand that confidentiality and boundaries are important in our mentoring relationship. As such, our shared expectations with respect to confidentiality of information shared and boundaries of discussion are:

LEARNING GOALS

Our Mentoring Partnership will assist the Mentee to achieve the following goals to support their further professional development activities:

ACTION PLAN

As a Mentoring Partnership, we agree to the following key action points to assist the Mentee in achieving the identified goals:

Specialist Refresher Program

Mentoring Learning Agreement



STATEMENT BY MENTEE (PROGRAM PARTICIPANT) AND MENTOR:

Please acknowledge that you have also discussed the following:

- We have discussed the possible challenges to our mentoring relationship and how we can prevent or manage these challenges.
- We have discussed any limits or constraints that will affect our interactions and how we can handle these.
- We confirm that we have a communication schedule in place.
- We confirm that we have agreed to an initial commencement and completion date with the recognition that the date of completion may be changed to ensure the participant is able to meet their learning outcomes.

Mentee (participant):		
Name:	Signature:	Date:
Mentor:		
Name:	Signature:	Date:

The RANZCP own all intellectual property rights (including any copyright, trade mark rights and patent rights) in the Information and this document. You may download, copy or print reasonable amounts of the Information for your personal, non-commercial use, but must not use it in a commercial way (for example, publishing, selling or modifying the Information) without RANZCP's prior written consent.