



RICHMOND
THE AMERICAN INTERNATIONAL
UNIVERSITY
IN LONDON

RICHMOND'S ALUMNI MENTORING PROGRAM

STUDENT MENTEE AGREEMENT FORM

I have read the description of the role of a Student Mentee and want to participate in this program Student Mentee.

I agree to follow the expectations below:

- ❖ Work with my Alumnus/a Mentor to help me with the process of starting my career.
- ❖ Work with the mentor assigned to me unless extenuating circumstances require a change.
- ❖ Maintain regular contact between the Alumnus/a Mentor me by phone and e-mail and if possible in person.
- ❖ Keep Alumnus/a Mentor personal information confidential.
- ❖ Continue the relationship over an agreed minimum period of time of three months and a maximum period to be decided between us.
- ❖ At the appropriate time, discuss with my Alumnus/a Mentor the details of terminating this relationship.
- ❖ Contact Alumni Relations Office at least a month prior to terminating the relationship
- ❖ Liaise with Alumni Relations as needed

I have read the description of the role. My signature below represents my agreement with the description and expectations of me as a Student Mentee in Richmond's Mentoring Programme.

Signature _____ Date _____

Please return to the Alumni Relations Office

by fax to +44 (0) 207 368 8470 or

by e-mail to Deirdre.simpson@richmond.ac.uk or alumni@richmond.ac.uk

by mail to Alumni Relations Office, Asa Briggs Hall, 7-17 Ansdell Street, London W8 5BN

For any questions or concerns, the telephone number of the Alumni Relations Office is +44 (0) 207 368 8468.