



RICHMOND
THE AMERICAN INTERNATIONAL
UNIVERSITY
IN LONDON

RICHMOND'S ALUMNI MENTORING PROGRAM

ALUMNUS/A MENTOR AGREEMENT FORM

I have read the description of the role of an Alumnus/a Mentor and am pleased to volunteer as an Alumnus/a Mentor.

I agree to follow the expectations below:

- ❖ Work together with the Student Mentee to help him/her start his/her career.
- ❖ Work with the Student Mentee assigned to me unless extenuating circumstances require a change.
- ❖ Maintain regular contact between the Student Mentee and me by phone and e-mail and if possible in person.
- ❖ Keep Student Mentee's personal information confidential.
- ❖ Continue the relationship over an agreed minimum period of time of three months or longer for a maximum period to be decided between Mentor and Mentee
- ❖ At the appropriate time, discuss with Student Mentee 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 an Alumnus/a Mentor 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.