

CHS Student/Mentor Agreement Form

Student's name: _____

English Teacher: _____

Mentor's name and contact info: _____

Date, time and location of meeting: _____

STUDENT: Describe your project.

STUDENT: Please discuss and record at least two goals for your project.

MENTOR: What support are you willing to provide to help this student meet his or her project goals?

MENTOR: What is the best way for the student to communicate with you? What days of the week and times are you usually free to meet?

STUDENT: What will you accomplish by the time the first five hours are due on ____?

MENTOR: What are the arrangements for the next meeting/contact?

MENTOR: Camas School District requires a background check for Senior Project mentors. This means you will need to submit a signed **CHS Mentor/Volunteer Form** and **a copy of your driver's license** to the Senior Project Coordinator: kristi.bridges@camas.wednet.edu. By signing this form you are agreeing to participate in that process.

Note: CSD employees have already cleared the required background check.

Mentor's signature: _____ Date: _____

MENTOR: Are you are a Camas School District employee? No: _____ Yes: _____