

CPA Mentoring Agreement

Mentee Name: Date :

Mentee Contact Information:

Mentor Name:

Mentor Contact Information:

Agreement: We, the undersigned, agree on the following guiding principles for our mentoring relationship. We have discussed how we will manage our relationship and the ways by which we will respect each other.

Confidentiality

What does confidentiality mean to us?

If we work for the same or different organizations, what unique confidentiality issues do we need to agree upon?

Logistics

Where shall we meet?

When shall we meet (preferred time of day)?

What is our meeting schedule for the year (September, November...)?

How might we communicate and keep in touch in-between our formal meeting schedule?

Expectations

What are some of the expectations we have of each other that will help us build and maintain our mentoring relationship?

How do we like to give and receive feedback?

How will we deal with conflicts as they occur?

Mentee Learning

Wrap-up and close

How will we bring our relationship to an end/close?

Mentee Signature

Mentor Signature