

## Mentorship Agreement Form

*(This document should be signed by your mentor at the time you discuss with them what their role will be in your Entrepreneurship Experience. Be sure that your Mentor reads your finished written proposal and understands the commitment before signing the proposal.)*

The role of the Entrepreneurship Experience Mentor is essential to the success of the Entrepreneurship Experience Capstone at \_\_\_\_\_ High School. As responsible men and women in the community, the Experience Mentors play an active part in the students' learning experience.

### **As an Entrepreneurship Experience Mentor, you will be asked to accept the following responsibilities:**

1. Serve as an industry expert and resource to the student throughout their Entrepreneurship Experience Capstone Experience.
2. Allocate time and plan to work with the student one-on-one as a part of their Capstone Experience.
3. Complete any necessary documentation and return to the student's Capstone Coordinator/Advisor. This may include:
  - Documentation of time the student spent with the mentor.
  - Evaluation of the student's finished experience.
4. Ensure the supervision and safety of the student while on a worksite (if applicable).

### **Additional useful information:**

1. The Entrepreneurship Experience Capstone will begin on \_\_\_\_\_ and continue through \_\_\_\_\_. Students are expected to meet with their mentor a minimum of \_\_\_\_\_ contact hours.
2. An immediate relative may NOT be in a direct line of supervision for the student.
3. Each student is assigned a Capstone Coordinator/Advisor who will act as a liaison and school contact for the mentor. You should expect to receive communication throughout the experience from this advisor. Because the school Advisor may or may not have expertise in the experience area, your assistance is especially important to the student.

Students have been asked to provide information to their mentors regarding the guidelines and requirements of the Entrepreneurship Experience Capstone Experience at \_\_\_\_\_ High School. If the student has not done so, please ask them to clarify these items for you.

We trust that the student's work will be beneficial not only to them, but also to you as the Entrepreneurship Experience Mentor. Thank you for your interest in the Entrepreneurship Experience Capstone program. If you have any questions, do not hesitate to reach out to the Capstone Coordinator/Advisor listed on the following page.

**Student Name:** \_\_\_\_\_

For students to complete the Entrepreneurship Experience Capstone course, they must work with a Mentor who has expertise in starting, running, and/or owning their own business. The Mentor must be willing to verify the student’s efforts and time spent and assist the student as they complete their experience. If you are willing to serve as this student’s Mentor, please complete the form below.

*Neither the School District nor the training station employer shall discriminate against any student or employee based on race, color, national origin, sex, marital status, parental status, or handicap in employment practices or on-the-job training experiences.*

I agree to serve as a Mentor for the above named student for their Entrepreneurship Experience.

**Mentor Name:** \_\_\_\_\_

**Business Name & Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Relationship to Student (if any):**

\_\_\_\_\_  
**Capstone Coordinator/Advisor Name & Signature** **Date**

\_\_\_\_\_  
**Student Name & Signature** **Date**

\_\_\_\_\_  
**Parent/Guardian Name & Signature** **Date**

\_\_\_\_\_  
**Entrepreneurship Experience Mentor Signature** **Date**

