

**MENTOR PARTICIPATION AGREEMENT**  
(clarifies and details mentor responsibilities)

The Project H.O.P.E. (Helping Offenders Pursue Excellence) Mentorship Program is an 18 month time commitment.

As a mentor in the Project H.O.P.E. Reentry Program, I agree to:

1. Never use drugs or alcohol when I am with the mentee.
2. Never offer the mentee drugs or alcohol.
3. Never take the mentee to my home.
4. Never allow the mentee to borrow my vehicle. (You may transport the mentee in your vehicle, providing you maintain liability insurance on your vehicle and the transport is in support of the mentor/mentee relationship).
5. Respect the privacy and personal boundaries of the mentee.
6. If I am running late for a scheduled meeting with the mentee, I will call the mentee to let him/her know what time I will be there.
7. Never ask my mentee to keep a secret. (Make sure you advise the mentee that you cannot keep any secrets that may endanger his/her life or that of somebody else).
- 8.
9. Never give the mentee money.
10. Never show partiality towards, or become emotionally, physically, sexually, or financially involved with the mentee.
11. Never accept gifts, personal service, or favors from the mentee.
12. Avoid situations which give rise to a conflict of interest or the appearance of a conflict of interest.
13. Never possess, carry, or use a firearm or dangerous weapon when meeting with the mentee.
14. Never curse or use bad language in the presence of the mentee.
15. Never make degrading, sexist, or racist comments.
16. Be mindful of self-disclosure and how much detail regarding you and your family you wish to provide to the mentee. Is there a need for the mentee to know?
17. Mentors should not share the mentee's confidential information with anyone. There are only a few exceptions to the confidentiality rule.
  - If the mentee's life is in danger
  - If the mentee is going to harm themselves or another person
  - When talking to program staff to check in and keep track of the mentoring relationship
18. I agree to have at least two face-to-face meetings with my assigned mentee per month, and a combination or total of four telephone calls or text exchanges per month.

I agree to abide by the Project H.O.P.E. Reentry Program Mentor Code of Conduct and Mentor Participation Agreement:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name of Mentor: \_\_\_\_\_