MENTORING AGREEMENT
MAPM—Ministerial Mentoring Experience

1. Student’s Name ________________________________

2. Mentor’s Name ________________________________

3. Selected Mentoring Outcomes (Chosen from Appendix C.)
   a. ____________________________________________
   b. ____________________________________________
   c. ____________________________________________

   Note: The above 3 topics must be selected from the attached “Core Qualities of an Effective Pastor List” (Appendix C). Other topics may be included later, as additional ministerial challenges arise during the mentoring process.

4. Mentoring Duration—One year minimum
   a. Start—day, month and year ________________
   b. End—day, month and year ________________

   Note: The mentorship relationship may continue for as long as both parties decide; however, for the purpose of the MAPM field supervision experience, a minimum of one year is required.

5. Meeting Details (x)
   a. Frequency: ( ) Quarterly ( ) Monthly ( ) Weekly
   b. Duration: ( ) Half hour ( ) One hour ( ) Other __________________________
   c. Location of meetings ________________________________

6. Confidentiality
   Both parties agree that any sensitive issues discussed during the mentoring experience should be held in the strictest confidence.

7. Student’s signature ________________________________ Date __________

8. Mentor’s signature ________________________________ Date __________

   Note: By signing this agreement, the mentor affirms that he/she will act in accordance with the MAPM Mentor Training/ Guidelines.