

Montrose Area Junior-Senior High School

Mentor's Information and Acknowledgement Sheet

STUDENT'S NAME (printed): _____

TYPE OF PROJECT (circle one): Career Exploration Community Service Superior Skills

MENTOR'S NAME (printed): _____

NAME OF BUSINESS, ORGANIZATION, ETC. _____

MENTOR'S BUSINESS OR HOME ADDRESS: _____

MENTOR'S BUSINESS OR HOME PHONE: _____

MENTOR'S BUSINESS OR HOME EMAIL: _____

Providing any information beyond one method of contact is optional but appreciated. Mentors will only be contacted should an emergency arise or if it becomes necessary to substantiate a student's whereabouts or actual involvement with the mentor regarding this project.

MENTORS: Please read the following statement and provide your signature of acknowledgement prior to having the form returned to the Senior Project Coordinator, who will place it on file.

As a mentor, I have reviewed the information regarding this Graduation Project and understand that the student(s) I'll be mentoring cannot graduate without completing the project in a thorough and timely manner. Moreover, I understand that it remains the responsibility of the student to plan accordingly, budget time wisely and carry out each step of the project in a respectful, professional and mature manner. By signing below, I also confirm that any and all logbook hours I verify with my signature will be, to the best of my knowledge, complete and accurate. I also recognize that, barring severe weather or unforeseen difficulties, the student I'll be mentoring is expected to complete all project hours by Mid-February, 2008 at the very latest, and may be completing hours on pace to finish them by October 2007.

mentor's signature

date