

Zaagaate' Mentoring Program Behavior Contract

I _____, agree to meet the following expectation(s):
(Mentee Name)

1. _____
2. _____
3. _____

What will happen if I no longer meet these expectations?

1. _____
2. _____

What steps do I need to take to make these changes happen?

1. _____
2. _____

What can other people (ie: ZMP staff, mentors, peers) do to help me reach my goals?

1. _____
2. _____

How will I know that I am making progress? _____

What should I do if I start to go backwards with my behavior?

1. _____
2. _____

What is something that I can do today to start changing my behavior?

1. _____
2. _____

Student Signature

Date

Parent Signature

Date

