Harford County Public Schools
SCIENCE AND MATHEMATICS ACADEMY
MENTORSHIP PROGRAM

Student Agreement

Student Name: _____

The student agrees:

1) To receive no pay for any work done in this placement.
2) To be on time and attend any scheduled meetings with the mentor.
3) To notify the mentor and school coordinator in case of absence or lateness in advance when possible.
4) To exercise honesty, courtesy and have a cooperative attitude while respecting and obeying rules of the mentor and his/her worksite.
5) To dress appropriately in accordance with business requirements.
6) To notify the school program specialist of any problems, issues or questions.
7) Not to accept transportation from another student or offer transportation to another student.
8) To adhere to all policies of Harford County Public Schools and understand that school policies also apply to the work site.
9) To ensure that he/she has a valid driver's license if he/she drives to work site.
10) To accept responsibility for your own negligent actions.
11) To make up the work missed due to absence from class. Make-up assignments will be given to you by your faculty advisor. Assignments will be related to your project.
12) To work diligently while on site or at school everyday.
13) To communicate with the mentor and faculty advisor on a weekly basis at minimum.
14) To provide a faculty advisor with a valid email address that you are expected to check daily.
15) To accept responsibility for assignments, benchmarks, communications, and due dates sent to the provided email address.

_____
Printed Name

_____ _____
Signature Date

Email Address: _____

Cell Phone: _____ Home Phone: _____

Please return this form via email or in person to your faculty advisor.