

YOUTH AGREEMENT FORM

(Place on agency letterhead)

I, _____
(name)

if chosen to participate in the _____ Program,
agree to:

1. meet with my mentor a minimum of _____ hours a week
2. notify my mentor if I cannot keep an appointment
3. notify my parents about scheduled appointments (date, time, and place) with my mentor
4. attend special events and activities
5. work with mentor on identified goals and plans
6. participate in interviews, questionnaires, program observation, and consent to release of program records data to staff

(youth signature)

(parent or guardian signature)

(program coordinator)

(caseworker or counselor)

(date)

(Note: After all parties have signed, make a copy for each)