

Red River Valley
PARALEGAL
Association



MENTORING PROGRAM

HANDBOOK

Mentor Information Guide

INSTRUCTIONS FOR MENTOR

1. Mentoring Program Guidelines Page 3
A copy of this form should be signed by the Mentor at the start of the mentorship and forwarded to RRVPA.
2. Letter to RRVPA Mentor Page 4
3. Mentor Confidentiality Agreement Page 5
A copy of this form should be signed by the Mentor at the start of the mentorship program and forwarded to RRVPA.
4. Mentor Program Request Form Page 6
A copy of this form is to be completed by the person applying to the Program as a Mentor and forwarded to RRVPA. This form is designed to assist the Program Chairperson to more accurately match a Mentee with an experienced Mentor to bet meet the Mentees stated needs.
5. Mentor Evaluation Form Page 7
A copy of this form is to be completed by the Mentor at the conclusion of the mentoring relationship and forwarded to RRVPA.

MENTORING PROGRAM GUIDELINES

The Red River Valley Paralegal Association (RRVPA) is committed to the promotion of career development and professionalism for future paralegals through the RRVPA Mentoring Program (Program), and invites junior paralegals and students enrolled in paralegal education programs to participate in the Mentoring Program.

1. The Program is voluntary.
2. Best efforts will be made to match Mentors and Mentees based on level of experience, specific areas of interest in the law, demographics, and any other areas of compatibility requested.
3. Mentors and Mentees will maintain confidentiality between the parties.
4. Mentors are not permitted to assist student mentees in academic assignments other than to provide general knowledge about the subject.
5. Neither Mentors nor Mentees will receive compensation for participating in the Program.
6. Participants will be available to meet with an assigned Mentor/Mentee for up to three months.
7. Neither RRVPA nor its Board members have any liability for guidance, suggestions, and/or advice provided to the Mentee during the mentoring relationship.

Read and consented to this ____ day of _____, 2018.

Mentor's Signature

Print Name

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Dear RRVPA Mentor:

Welcome to the Red River Valley Paralegal Association Mentor Program. We are excited about your involvement with the program. Your Mentor/Mentee relationship will contribute to the success and retention of new paralegals and a deeper understanding of the profession.

This program's purpose is to exchange information between established paralegals and up and coming paralegals. We want to foster and enrich participant's career experiences.

We are here to ensure that you have the resources you need to make the most of this important partnership. Please let us know if there is anything that RRVPA can do to assist you during the program.

Sincerely,

Rachel Martin

Rachel Martin
President
Red River Valley Paralegal Association

**Red River Valley Paralegal Association
Mentoring Program
Mentor Confidentiality Agreement**

I agree that I am a willing participant in the RRVPA Mentoring Program, and as such, commit to working with my new Mentee, attending all meetings arranged between us, and communicating with my Mentee on a regular basis. In cases of emergencies where I am unable to attend a meeting, I will provide advanced notice to my Mentee. I will assist the Mentee in developing personal goals through coaching and input.

I agree that issues/concerns discussed during our meetings are confidential. If there is a threat of physical harm to either party or to others, the confidentiality agreement must be broken to seek protection for the endangered individual.

I agree to a no-fault conclusion of this relationship. If for any reason the relationship seems inappropriate, either party has the option of discontinuing the relationship. He or she should discuss this decision with the Mentor Coordinator before terminating the relationship.

By entering into the mentoring program, the participants agree that neither the Red River Valley Paralegal Association, nor its Board Members have any liability for the guidance, suggestions, and/or advice provided to them during their mentoring relationship.

Read and consented to this _____ day of _____, 2018.

Mentor's Signature

Print Name

MENTOR PROGRAM REQUEST FORM

Qualifications of Mentor: Must be a RRVPA member that has been employed as a paralegal for more than one year.

Date: _____

Name: _____

Phone: _____ Email: _____

Employer: _____ Years Experience: _____

I would like to be matched with a mentee for the following purpose - check all that apply:

_____ Practice area related paralegal duties

Areas of Work:

_____ Legal Research Skills

Circle: LexisNexis or Westlaw

_____ Legal Writing Skills

_____ Technical Skills

Circle: Microsoft Word, Excel, PowerPoint, Outlook, Summation, Timekeeping/Billing

_____ Career Planning

_____ Education goals

_____ Resume review and tips for interviewing for a paralegal position

_____ Other:

Are you available for (check all applicable):

Phone calls: (morning) _____ (afternoon) _____ (evenings) _____

Meetings: (morning) _____ (afternoon) _____ (evenings) _____

Additional comments:

**RRVPA MENTOR PROGRAM
MENTOR EVALUATION**

We would like to have your opinion of the mentor program so that we may evaluate and strengthen our program for the future. Please complete the questions below and return the survey to the program coordinator.

1. What is the status of your relationship with your mentee? If not ongoing how long did it last?

2. How would you rate the mentor program?

 excellent very good good poor

3. How would you describe the quality of your experience as a mentor in the program?

 excellent very good good poor

4. Do you think the time you spent with your mentee was sufficient?

 yes almost not really no

5. Would you volunteer as a mentor again?

 yes possibility not sure no

6. What was most satisfying about the mentor program?

7. What was least satisfying about the mentor program?

8. What would you suggest to improve the mentor program?