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## COMMITMENT FORM

### 1. DETAILS ON THE PARTICIPANT

Name of the participant:	
Date of birth:	
City/Country	
Contact Information	Phone:                      Email:
Contact person	Name:
	Phone:                      Email:
Disease	

### 2. DETAILS OF THE PROGRAM ORGANIZER

Organizing entity	
Contact person	Name:
	Phone:                      Email:
Start date of the mentoring process	

By signing in this document, the participant and the organization confirm that they will abide to the principles and values of the “Quality Youth Mentoring for Inclusion – Big Brother to overcome shared barriers” program attached below:

Date: \_\_/ \_\_/ \_\_\_\_

Signature:

Participant:

\_\_\_\_\_

Entidad Organizadora:

\_\_\_\_\_

CALENDAR			
MENTOR			
MENTEE			
SESSION		DAY & HOUR	OBJECTIVES
01.	<b>Building the Relationship</b>	__ / __ / ____ (--:--)	The first phase of the mentoring process aims to create a strong foundation for a successful and supportive mentoring relationship.
02.	<b>Discovering my role in society</b>	__ / __ / ____ (--:--)	The second phase aims to understand the relationships with family and friends and to help the mentee build up a supportive network and develop an active role in society.
03.	<b>My daily life</b>	__ / __ / ____ (--:--)	The third phase provides support to overcome the challenges and foster the strengths of individuals, empowering them to navigate daily life with confidence.
04	<b>Thinking about the future</b>	__ / __ / ____ (--:--)	The fourth phase reflects about the future opportunities and different career paths for the mentee and develops his/her critical and analytical thinking.
05.	<b>Talking about my disease</b>	__ / __ / ____ (--:--)	The fifth phase will focus on the disease. Mentor and mentee will see together testimonies of people in the same situation and will train mechanism to improve mental and physical health.

## GROUND RULES

**MENTOR**

**MENTEE**

**TOPICS/QUESTIONS**

**AGREEMENTS / RULES**

Which are my main objectives and responsibilities?

How often will we meet and where?

How long will this mentoring process last?

How will we communicate?

When am I available, and when not?

When is it ok to postpone the meeting?

How and when will we let each other know if we cannot attend our meeting?

What happens if one of us skips the meeting without announcing it?

With whom can we share the things we talk about?

What topics are confidential, and what are the topics that should be discussed with someone outside the process?

What topics would I like to discuss?  
Which ones would I prefer to avoid?

What if something about this process makes me uncomfortable?



## SKILLS ASSESSMENT REPORT

SKILLS ASSESSMENT REPORT			
MENTOR			
MENTEE			
SKILL	START	END	FUTURE RECOMMENDATIONS
Self-awareness			
Communication skills			
Goal Setting and Planning			
Networking			
Self-Advocacy			
Proactivity			
Self-Management			
Problem-Solving			
Decision-Making			
Confidence and Resilience			
Critical Thinking			
Priorities			
Active Listening			
Emotional Intelligence			
Empathy			

## DIARY / JOURNAL

<b>Description</b>	<p>The mentor/mentee can keep a diary in which he/she shares reflections on his/her role as a mentor and on the mentoring process. After each meeting mentor/mentee can look back in his/her diary on their meeting, on what he/she was satisfied with, what could have been different. The diary is the personal matter of the mentor/mentee and serves him/her as a form of self-reflection.</p>
<b>Format</b>	<p>The diary can be developed in different formats:</p> <ul style="list-style-type: none"> <li>• <b>NOTEBOOK.</b> Use paper and writing to capture our reflections, doubts, and questions.</li> <li>• <b>VIDEOS.</b> Record short video blogs reflecting on activities and progress.</li> <li>• <b>AUDIO.</b> Record audio where we narrate our experiences and reflections.</li> </ul> <p>Through this review, both parties can become aware of situations where they feel secure and those that present a challenge.</p>
<b>Dissemination Activities</b>	<p>The journal, in written, video, or audio format, can be used to give visibility to the project and encourage other people to participate in the mentoring process.</p>

## Relationship Assessment (MONITORING)

- Program contacts mentors and mentees and parents/caregivers at a minimum frequency. (EVERY TWO WEEKS)
- Program provides mentors with access to relevant resources (e.g., expert advice from program staff or others, publications, Web-based resources, experienced mentors)
- In addition, the match support staff member should share access to program resources, upcoming events, ongoing trainings and workshops, and other program updates.

TOPICS	QUESTIONS MENTOR	QUESTIONS MENTEE
Relationship and Communication	<ul style="list-style-type: none"> <li>• How do you feel about your relationship with your mentee?</li> <li>• Are you comfortable communicating openly with your mentee?</li> <li>• How often do you meet or communicate with your mentee?</li> </ul>	<ul style="list-style-type: none"> <li>• How do you feel about your relationship with your mentor?</li> <li>• Are you comfortable communicating openly with your mentor?</li> <li>• How often do you meet or communicate with your mentor?</li> </ul>
Goals and Progress	<ul style="list-style-type: none"> <li>• Have you set clear goals with your mentee?</li> <li>• How do you evaluate your mentee's progress towards these goals?</li> <li>• Have your mentee's goals changed since the start of the mentoring relationship?</li> </ul>	<ul style="list-style-type: none"> <li>• Have you set clear goals with your mentor?</li> <li>• How are you progressing towards achieving these goals?</li> <li>• Have your goals changed since the start of the mentoring relationship?</li> </ul>
Support and Resources:	<ul style="list-style-type: none"> <li>• Do you feel equipped to provide the support and resources your mentee needs?</li> <li>• Are there specific areas where you feel you need more resources or support?</li> </ul>	<ul style="list-style-type: none"> <li>• Does your mentor provide the support and resources you need?</li> <li>• Are there specific areas where you feel you need more guidance?</li> </ul>
Feedback and Improvement:	<ul style="list-style-type: none"> <li>• How do you provide feedback to your mentee?</li> <li>• Do you feel your feedback is received well and is constructive?</li> <li>• What aspects of the mentoring process do you think could be improved?</li> </ul>	<ul style="list-style-type: none"> <li>• How does your mentor provide feedback?</li> <li>• Is the feedback helpful and constructive?</li> <li>• What aspects of the mentoring process do you think could be improved?</li> </ul>
Personal and Professional Development:	<ul style="list-style-type: none"> <li>• What new skills or knowledge have you gained through this mentoring relationship?</li> </ul>	<ul style="list-style-type: none"> <li>• What new skills or knowledge have you gained through this mentoring relationship?</li> </ul>



	<ul style="list-style-type: none"><li>• How has this relationship impacted your personal or professional growth?</li></ul>	<ul style="list-style-type: none"><li>• How has this relationship impacted your personal or professional growth?</li></ul>
Satisfaction:	<ul style="list-style-type: none"><li>• Overall, how satisfied are you with your mentoring experience?</li><li>• Would you participate in this mentoring program again?</li></ul>	<ul style="list-style-type: none"><li>• Overall, how satisfied are you with your mentoring experience?</li><li>• Would you recommend this mentoring program to others?</li></ul>
Meeting Frequency and Quality:	<ul style="list-style-type: none"><li>• Are the meetings regular and timely?</li><li>• Do you find the meetings productive and valuable?</li></ul>	
Challenges and Solutions:	<ul style="list-style-type: none"><li>• Have there been any challenges in the mentoring process? If so, how have you addressed them?</li><li>• What strategies or methods have been most effective in overcoming these challenges?</li></ul>	
Future Goals:	<ul style="list-style-type: none"><li>• What are the next steps or future goals in your mentoring relationship?</li><li>• How can the mentoring relationship continue to evolve to meet these goals?</li></ul>	

## Relationship Assessment (FINAL EVALUATION)

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**Question 1:** How satisfied are you with your overall experience in the mentoring program?

- Very satisfied
- Satisfied
- Neutral
- Dissatisfied
- Very dissatisfied

**Question 2:** How would you rate the effectiveness of the mentor-mentee matching process?

- Highly effective
- Effective
- Neutral
- Ineffective
- Highly ineffective

**Question 3:** How would you describe the communication between you and your mentor/mentee?

- Excellent
- Good
- Average
- Poor
- Very poor

**Question 4:** How helpful has your mentor/mentee been in providing support and guidance?

- Extremely helpful
- Very helpful
- Moderately helpful
- Slightly helpful
- Not helpful at all

**Question 5:** To what extent do you feel you have grown or developed as a result of participating in the mentoring program?

- Significantly
- Moderately
- Slightly
- Not at all

**Question 6:** Do you feel that the structure of the mentoring program (e.g., frequency of meetings, duration) was appropriate?

- Yes, very appropriate
- Yes, somewhat appropriate
- No, not very appropriate
- No, not appropriate at all

**Question 7:** What were your expectations going into the program?

**Question 8:** how this program met your expectations?

**Question 9:** what were the main challenges you encountered during your mentoring program?



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**Question 10:** Do you have any additional comments or feedback you would like to share about your experience in the mentoring program?

Thank you for taking the time to complete this questionnaire. Your feedback is valuable!