

**School - employer - mentee**

**collaboration guide**

*“Enabling transformation and change through trained educators and youth workers and inclusive workplace environments by creating an innovative methodology and resources for the development of life skills and employability competences in young adults with learning disabilities and difficulties, while supporting their transition into inclusive workplaces.”*

Agreement Sample

*(The questions in italic should help in getting the message across to persons with learning difficulties and / or disabilities; they need to be answered clearly, as the simplified understanding of the given answers is needed to start the mentoring relationship)*

*What is this document?*

This Collaboration guide explains what the school, employer mentor and mentee will do and expect from each other. The goal is to create a clear, supportive, and flexible space to help the mentee learn and grow.

Mentor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mentee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School responsible Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Review Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

End Date (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Why are we here? Why are we doing this?*

**1. Purpose of the Mentoring Relationship**

The purpose of this mentoring relationship is to give help, support, and encouragement to the mentee. It will help them reach their personal, social, and work goals. This agreement makes sure that all three actors, the school, the mentor and mentee communicate clearly, understand each other, and show respect.

*What are we going to do? What will we learn? How much time will it take?*

**2. Goals and Objectives**

School, mentor and mentee agree to work together on the following goals:

Goal 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Step-by-step actions we need to take to reach it:

a) \_\_\_\_\_\_\_\_\_\_\_\_

b) \_\_\_\_\_\_\_\_\_\_\_\_

c) \_\_\_\_\_\_\_\_\_\_\_\_

Timeframe for completion / time we need to achieve this goal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Goal 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Step-by-step actions we need to take to reach it:

a) \_\_\_\_\_\_\_\_\_\_\_\_

b) \_\_\_\_\_\_\_\_\_\_\_\_

c) \_\_\_\_\_\_\_\_\_\_\_\_

Timeframe for completion / time we need to achieve this goal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Goal 3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Step-by-step actions we need to take to reach it:

a) \_\_\_\_\_\_\_\_\_\_\_\_

b) \_\_\_\_\_\_\_\_\_\_\_\_

c) \_\_\_\_\_\_\_\_\_\_\_\_

Timeframe for completion / time we need to achieve this goal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Additional goals may be added if necessary.)

*Who is doing what? What are the things we have to do all the time during mentorship?*

**3. Roles and Responsibilities**

Mentor and School’s Responsibilities

* Support and encourage
  + Help and support the mentee, and give helpful feedback.
* Communicate clearly
  + Use simple, easy-to-understand words when explaining things.
* Create a safe environment
  + Make sure the mentee feels safe, respected, and comfortable while learning.
* Be flexible
  + Change how you communicate or teach to meet the mentee’s needs.
* Monitor progress
  + Regularly check how the mentee is doing and give help when needed.
* Model behaviour
  + Show good behaviour, attitudes, and communication skills that the mentee can learn from.
* Be patient and understanding
  + Give the mentee extra time to think and complete tasks.

Mentee’s Responsibilities

* Be open and honest
  + Tell your mentor how you feel, and share your thoughts and worries.
* Participate actively
  + Take part in meetings and activities, and ask questions if you don’t understand something.
* Work toward goals
  + Try to finish step-by-step actions or tasks and work on the goals you and your mentor have agreed on.
* Communicate needs
  + Tell your mentor if you need help or changes to make learning easier.

*What can we do if there is a conflict?*

## 4. Conflict and Issue Management

School, Mentor and Mentee establish clear, transparent, and accessible procedures to identify, manage, and resolve potential issues and misunderstandings that may arise during the school-employer collaboration. A structured process ensures that conflicts—whether related to students, communication breakdowns, or differing expectations—are addressed consistently and constructively by all parties involved.

**Protocol Phases**:

1. **Identification** – The issue is recognised and documented by any stakeholder (tutor, teacher, student, company representative).
2. **Initial Communication** – The parties directly involved are encouraged to discuss the issue informally, with the support of their respective tutors or supervisors if needed.
3. **Formal Notification** – If the issue remains unresolved, it must be formally reported using the Issue Reporting Form (Annex I).
4. **Joint Review** – School and company coordinators jointly review the case and gather additional information if necessary.
5. **Resolution Plan** – A tailored resolution plan is defined and agreed upon by the relevant parties.
6. **Follow-up and Monitoring** – The situation is monitored to assess the effectiveness of the solution.
7. **Escalation (if necessary)** – If unresolved, the issue may be referred to a higher-level coordination team or external mediator.

To ensure proper documentation and formal management of issues, annex I helps you issue a formal request.

*How often will we talk? How can we reach each other?*

**4. Meetings and Communication**

Frequency of Meetings:

School, Mentor and mentee will meet \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (daily/weekly/bi-weekly/monthly).

(The frequency can be adjusted based on the mentee’s needs and preferences.)

Preferred Meeting Format:

Meetings will take place via (in-person, phone, video meeting or other):

(define what is preferred, when to use what format)

Length of Meetings:

Each meeting will last approximately \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (minutes/hours).

Agreed-upon Schedule:

Meetings will take place on \_\_\_\_\_\_\_\_\_\_\_\_\_ (day of the week) at \_\_\_\_\_\_\_\_\_\_\_ (time).

(Ensure that the time and format suit the mentee’s abilities and preferences.)

*What would we like to use for talking or communication?*

**5. Communication Methods:**

Mentor’s Preferred Communication Methods:

Email

Phone

Text message

Online meeting

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mentee’s Preferred Communication Methods:

Email

Phone

Text message

Online meeting

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

School’s Preferred Communication Methods:

Email

Phone

Text message

Online meeting

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Ensure that all parties understand and are comfortable with the methods chosen.)

*What tools and resources will we use that can help us do better?*

**6. Accommodations**

To ensure that the mentee can fully participate, the following accommodations will be made (if necessary):

* use of visual aids, checklists, or simplified materials
* providing additional time to process information
* assistance with task breakdown or guidance on specific skills
* use of assistive technology or communication tools
* regular review and feedback in accessible formats

Specific Accommodations Needed (if applicable):

*What can we share with others outside this mentorship? What is OK to share, and what is considered a secret?*

**6. Confidentiality**

School, mentor and mentee agree that discussions will remain confidential. Sensitive information shared by either party will not be disclosed without consent.

*How will we rate each other? How will we talk about what we can do better?*

**7. Feedback and Review**

Regular feedback is important for the success of this relationship. Both mentor and mentee agree to:

* Check-in frequency:
  + Feedback will be given during each meeting or after specific tasks are completed.
* Review of Progress:
  + At the end of every month, mentor and mentee will review progress toward the goals and adjust if needed.

Both parties will be open to feedback and will discuss any concerns or suggestions during scheduled meetings.

*How long will this mentoring last? When and how can it end?*

**8. Duration and Termination**

This agreement will be in place for a duration of \_\_\_\_\_\_\_\_\_\_\_\_ months, after which it will be reviewed and extended if both parties agree.

Termination of Agreement:

Either party can end the relationship if it is no longer beneficial. A notice of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (days/weeks) should be given in writing and in-person to the other party.

*If we both agree to everything, we need to sign this agreement. Where can we sign? Who needs to sign? Do we both get a copy of the document?*

**9. Signatures**

This agreement signifies the commitment of both mentor and mentee to work collaboratively toward the mentee's development. Both parties agree to abide by the terms outlined above. This agreement is made in \_\_\_\_\_\_\_\_ (No. of copies) copies which need to be signed by all involved parties.

Mentor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Mentee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

School Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

ANNEX 1

**ISSUE REPORTING FORM** *Confidential – To be submitted to the designated school or company coordinator*

### 1. General Information

* **Date of submission:** ..................................................
* **Name of the person submitting the report:** ..................................................
* **Role:** ☐ Student  
   ☐ School mentor  
   ☐ Company mentor  
   ☐ Teacher  
   ☐ Other (please specify): ..................................................
* **Contact information (email/phone):** ..................................................

### 2. Description of the Issue

* **Date of the incident or issue:** ..................................................
* **Location (e.g., workplace, school, online):** ..................................................
* **Parties involved (names and roles):**
  + ..............................................................................................
  + ..............................................................................................
* **Detailed description of the issue:** *(Please describe clearly what happened, how, and in what context. Attach additional pages or documentation if necessary.)*

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 ....................................................................................................................

### 3. Actions Already Taken

* **Have you already addressed the issue with anyone involved?** ☐ Yes  
   ☐ No

If yes, please describe the steps taken and the outcome:  
 ....................................................................................................................  
 ....................................................................................................................

### 4. Suggested Resolution (optional)

*(Please indicate how you think the issue could be resolved, if applicable.)*

....................................................................................................................  
 ....................................................................................................................

### 5. Urgency and Impact

* **How urgent is this issue?** ☐ Low – Can be addressed over time  
   ☐ Medium – Requires attention within the next few days  
   ☐ High – Requires immediate attention
* **Does the issue affect the well-being, safety, or rights of any individual?** ☐ Yes  
   ☐ No

If yes, please explain:  
 ....................................................................................................................

**Signature (if not anonymous):** ..................................................  
 **Date:** ..................................................

**Note:** If you wish to report anonymously, you may omit personal information in Section 1. In that case, please ensure the description is as detailed as possible to allow appropriate follow-up.