## Safe Mentoring Relationship Pledge



(to be completed by mentor and mentee)

I,, agree to invest	my time in the mentoring relationship with
in the role of ment	tor/mentee. I understand that mentoring
requires a safe space and agree to provide this to the best of my ab	oilities. This includes a commitment to
create an environment free of discrimination and harassment on all	bases, includingbut not limited to-race,
ethnicity/cultural background, sexual orientation, gender identity,	disability, neurodiversity, religion, citizenship/
immigration status, and socioeconomic status.	
Additionally, I acknowledge that information discussed between m	entor and mentee is confidential and will not
be disclosed to outside individuals, including employers, family me	mbers, and other professionals without the
permission of my mentor/mentee. The only exception to this would	be in the case of a medical or mental health
emergency or a public safety risk. Mentors must disclose if they are	e mandatory reporters.
Mentor Signature	Date
Mentee Signature	Date