Steinmetz College Prep

Parent/Guardian Consent Form for Mentees

I, the parent or legal guardian of, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, give permission for my child to participate in the Peer Mentor Program at Steinmetz College Prep. I understand that the purpose of the Peer Mentor Program is to foster a sense of community amongst students at Steinmetz and to help build bridges across grade levels.

* I fully understand that mentees will be interacting with mentors that are upperclassmen, based on a pre-assessment they will be given prior to the start of the program. I am aware that my child will be meeting with his/her mentor once a week for one period.
* I am aware that all mentors will be trained by some of the counselors at Steinmetz College Prep, and will notify a member of the Counseling Department if a mentee shares something that is of great concern.  There is a possibility that your child and his/her mentor may interact with other mentees and mentors for activities.  Activities will vary, but all activities will be done under counselor supervision during this time.
* I understand that the Peer Mentor Program will only take place on school premises.
* I allow Steinmetz to take photographs of my child during the Mentoring Program and waive all rights of compensation

Signature of Parent/Guardian                          Date                 Printed Name of Parent/Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_        \_\_\_\_\_\_\_\_\_\_\_        \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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