Department of Biomedical and Health informatics
Mentor/Mentee Agreement

To be completed for all independent-study style classes including MEDB 5530, 31, 95, and 99. Completed, signed forms should be saved to the student’s record in Project Concert by the end of the second week of the semester for which the agreement has been made. Email forms to templetont@umkc.edu or add directly into the student’s “documents” section in Project Concert.

Student (mentee) Name: _______________________________________________________

Faculty (mentor) Name: ______________________________________________________

Class Number and Title: ______________________________________________________
  e.g. MEDB 5599: Research and Thesis

Research Area or Class Topic: __________________________________________________

We are voluntarily entering into a mentoring relationship from which we both expect to benefit. We want this to be a rewarding experience with most of our time spent in professional development activities. To this end, we have mutually agreed upon the terms and conditions of this relationship as outlined below. To add additional areas on which the mentor/mentee agree, please add to comments in each area, then both parties initial.

Confidentiality: Any sensitive issues that we discuss will be held in confidence, within the policies of the University. The mentor will take care not to discuss student performance or behavior with other students.
Comments:

Duration of the relationship: The mentoring relationship will continue as long as both of us are comfortable, or until ________________________________. (This may include start and end date of the thesis/capstone/class; equivalent time expected to complete project components and write thesis/capstone/class assignment). Mentors will act to promote the well-being of the student and respect their need for guidance as well as autonomy in research decisions.
Comments:

Learning Objectives of the Thesis/Capstone/Class: The goal(s) of the student engaging in this project is (are) to develop skills as follows:
1.
2.
3.
4.

**Frequency of Meetings:** We will attempt to meet at least ____ time(s) each month for a period of ____ minutes. If either cannot attend a scheduled meeting, we agree to notify one another in advance. If more meetings are necessary, each party will attempt to accommodate reasonable requests for meetings in a timely fashion.

Comments:

**Research Integrity and Regulations:** We agree to comply with UMKC’s and DBHI’s policies around research integrity (CITI training, IRB or IACUC approval, HIPAA standards, Data Integrity Standards – collection, security and data entry, if relevant).

Comments:

**University Facilities:** As appropriate, the graduate student agrees to only make use of facilities/properties of the institution following consultation and approval of the faculty member or department representative.

Comments:

**Time-off/Sickness Leave:** We agree to discuss time-off requests in advance, and compromise if needed. Additionally, the student agrees to communicate immediately with the mentor if they are unable to work because of illness or an emergency. If leave exceeds 10% of the overall time that would be allocated to the research project, an extension pro rata will be added. In the event that illness, emergency or another situation prevents the mentor from fulfilling their duties as research/thesis/capstone/course mentor, they agrees to work with the Department Chair to ensure continuity and oversight of the project.

Comments:

**Data Use:** Collaboratively, we will discuss and determine which data/database is going to be used, and specify who owns the data. We also agree to the following policies for use of data, storage of data, confidentiality, data transport (if relevant) and data security.

Comments:
**Authorship:** We agree to discuss *in advance* issues of authorship and intellectual property related to the thesis/capstone/class project, including any presentations, manuscripts, chapters or other project-related products associated with the research/class process. This includes order of authorship according to the relative contributions of all team members to the manuscript, etc. Attribution of authorship will follow the guidelines outlined by the International Committee of Medical Journal Editors ([http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html](http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html)).

Comments:

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**Communication:** We both agree to foster open communication throughout the relationship. The student agrees to plan, develop and comply with a timeline/critical benchmarks for completion of the thesis/capstone/class project. Both student and research advisor agree that any modifications to this timeline will be made in joint consultation. The research advisor agrees to communicate expectations with respect to punctuality, hours worked, procedures for requesting time off, and overall expectations at the outset of the relationship.

Comments:

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**Evaluation:** The research advisor will interact with student in a professional, civil and collegial manner in accordance with university policies and relevant laws and will impartially evaluate student performance as outlined in the relevant course syllabus (e.g. MEDB 5530, 31, 95, 99), and based on the goals outlined in this agreement. In all cases grade disputes will be handled according to the syllabus, with special attention given to timely resolution of all disputes to ensure graduation goals for the student.

Comments:

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**No Fault Termination:** We are committed to open and honest communication in our relationship. We will discuss and attempt to resolve any conflicts as they arise. If, however; one of us needs to terminate the relationship for any reason, we agree to abide by the other’s decision. In the event that the relationship is terminated, the chair of the department will work with the student to identify another faculty mentor.

Comments:
Signatures:

__________________________________________________________________________
DBHI Graduate Student                                    Date

__________________________________________________________________________
Faculty Mentor                                              Date

Adapted from:
Tilburg University Guidelines, Tilburg Belgium; AAMC How to Mentor Graduate Students; LSU Health Sciences Center, Department of Physiology; and, Brainard S.G. et al. A curriculum for training mentors and mentees: Guide for Administrators. Seattle Washington.