

# *Alaska Native Mentoring Program*

## **Partnership Agreement:**

### **Organizations involved:**

A. The Alaska Native Mentoring Program (ANMP) is located at 1145 C Street Anchorage, AK 99501 is a nonprofit faith based organization. ANMP is a new initiative under Covenant Youth of Alaska (CYAK). ANMP works toward developing mentoring sites across Alaska. ANMP is a catalyst in developing mentoring sites and acts as a resource throughout the process of the partnership. ANMP trains mentors and measures progress through monthly progress reports from mentoring sites. The mentoring process will be fostered by using a 'tool box' (mentoring resource) where ANMP staff will train volunteer mentors in each site.

B. The \_\_\_\_\_  
is a \_\_\_\_\_  
located at \_\_\_\_\_  
and does \_\_\_\_\_  
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### **Contribution of each entity:**

A. ANMP will contribute the following: 1) training for volunteer mentors, 2) tool box resource, 3) all necessary forms (mentor, mentee, background check, parent permission form, and 12 month commitment), and 4) additional resources (articles, books, magazines).

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- B. The \_\_\_\_\_ will contribute the following: 1) monetary resources for mentoring activities, 2) meeting space for mentoring training, 3) round trip ticket for ANMP staff to hold a mentoring training at our site initially and a six month follow-up, 4) overseeing the mentoring site in our community and has assigned a trusted, responsible, mature person as our site leader (name): \_\_\_\_\_ 5) site leader submits monthly progress report forms to ANMP, and 6) holds quarterly group meetings with mentors and mentees.

## **Communication Details:**

- A. Dale Smith is the ANMP Program Director. Address is 1145 C Street Anchorage, AK 99501, telephone is (907) 444-8364, email is [dale@cyak.org](mailto:dale@cyak.org).

- B. Site Leader: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
email (if applicable): \_\_\_\_\_

## **Term of Agreement:**

- A. Agreement begins: \_\_\_\_\_
- B. Duration of agreement: \_\_\_\_\_
- C. Termination of agreement (how will this agreement end): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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D. What happens at the end of or after the agreement: \_\_\_\_\_

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**Signatures:**

Both entities have read and agreed to the responsibilities of each organization. By signing this document, both organizations have agreed to perform their respective responsibilities.

**ANMP Program Director:**

(Printed Name): \_\_\_\_\_

(Signature): \_\_\_\_\_

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

**Site Leader for \_\_\_\_\_ :**

(Printed Name): \_\_\_\_\_

(Signature): \_\_\_\_\_

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