

**PCM-1 and PCM-3 Student Mentor Agreement, AY 2021-22**

You are required to meet with your student mentor and student mentee **once in semester one and twice in semester two**. You are responsible for meeting each other and share the experience of seeing patients while rotating through the 7 required clerkships.

I agree to meet 3 times throughout the year as stipulated in the mentor/mentee description and requirements. This includes facilitating and responding to contact via call/page and/or email.

FAILURE TO FULFILL THESE REQUIREMENTS WILL RESULT IN A "CONCERNS" IN THE "PROFESSIONALISM" COMPETENCY OF PCM-1 OR PCM-3

\_\_\_\_\_  
PRINT M1 NAME:

\_\_\_\_\_  
M1 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
PRINT M3 NAME

\_\_\_\_\_  
M3 Signature

\_\_\_\_\_  
Date

PLEASE TURN THIS IN TO DIANE STANCIK, PCM-1 COORDINATOR, WITH BOTH STUDENTS' SIGNATURES NO LATER THAN **FRIDAY SEPTEMBER 17<sup>th</sup>, 2021** AT **4:30 PM, ROOM 300**