

2017-2018 RSPH Mentoring Program Students Professionalism Contract

As a mentee of the 2017-2018 RSPH Mentoring Program, I understand my participation requires professional behavior. I will be held to high ethical standards and responsibility. I understand that my actions reflect upon me, my fellow students, and the Rollins School of Public Health (RSPH).

The following principles are to ensure my professionalism during the 2017-2018 Mentoring Program. I am expected to adhere to the principles in all of my interactions (in person, in writing, by phone, or by email) on & off campus, with all business contacts, including Emory University faculty, staff, alumni, employers, community members and any other members of the RSPH community.

(Please initial after you read & understand the following policies.)

- ___ I've read the Mentee Guide provided by the Office of Career Development thoroughly and carefully.
- ___ I will dress in business formal when attending Career Development events and when meeting with business contacts, unless I am notified otherwise.
- ___ I will communicate and present myself in a professional manner in all interactions including in person, in writing, by phone, or by email.
- ___ My matched mentor may not work in the specific area that I'm interested in, but I will still be respectful and ask for advice, information, and possibly other Public Health contacts.
- ___ I will make the initial contact and be proactive in updating my mentor in a professional manner.
- ___ I will be courteous and respectful to my mentor and to the other business contacts including Emory University faculty, staff, alumni, employers, community members and any other members of RSPH community because they spend their valuable time advising me.
- ___ I will respond to my mentor's and the other business contacts' calls and emails within 24 hours.
- ___ I will follow-up with a thank you letter after networking with an individual within 24 hours.
- ___ I will NEVER ask for a job when interacting with my mentor and other business contacts.
- ___ I will NEVER spam a contact with multiple e-mails or with multiple phone calls within one week.
- ___ I will NEVER ask a networking contact to mass distribute my resume.
- ___ I will NEVER share networking contacts' information with others without permission.
- ___ I will make a cancellation 2 business days prior to my scheduled event/appointment/ meeting, if a conflict arises. In other words, I will ALWAYS honor my commitments with all business contacts.
- ___ In case of an emergency (accident, injury, illness, etc.), I will call the person I plan to meet, apologize and set up a time to reschedule.

By signing this document I agree to adhere to the Office of Career Development's policies required to conduct myself with integrity in a professional manner. **I also acknowledge if I fail to adhere above mentioned policies, I may be suspended from access to services and events provided by the Office of Career Development.**

Student Signature: _____ **Date:** _____

Printed Student Name: _____ **Graduation Year:** _____ **Dept.:** _____