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**Professional Mentor Agreement**

Dear Course Director,

Student Name (PRINT NAME):

Organisation:

I am agreeing to support the above student as **Professional Mentor** for NM6013 Advanced Practice Clinical Practicum (Nursing) 1, NM6014 Advanced Practice Clinical Practicum (Nursing) 2. The mentorship role is at Assistant Director of Nursing and up level.

I understand that this support includes the following (please tick  all that apply):

Support opportunities for professional teaching and learning in NM6013 Advanced Practice Clinical Practicum (Nursing) 1, NM6014 Advanced Practice Clinical Practicum (Nursing) 2.

Oversee professional development.

Assist the student in identifying and meeting professional learning objectives

Collaborate with the student to identify professional experiences appropriate to objectives

Provide and document timely and necessary feedback to the student

Communicate with the Course Director and/or Module Leader as required

Support ANP role development

Yours sincerely,

Signature

PRINT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_