



Heart to Heart Mentor Agreement/Volunteer Services Description

Mentor's Name: _____

I agree to be a volunteer mentor for **embrella** as part of the Heart to Heart mentoring program. I understand that this is a volunteer opportunity, not to be construed as employment with **embrella**. I understand that I have the right to withdraw from the program at any time and will notify **embrella** of any problems that I am incurring. **embrella** also has the right to terminate my participation in the program at any time, with or without advance notice.

embrella is providing this Mentor/Mentee matching program to serve as a resource to the community. **embrella** is not responsible for the advice provided in the Mentor/Mentee relationship. Any information provided should be verified with a Family Support Advocate. **embrella** does not guarantee the quality of the advice provided in this relationship nor is making any representation about the mentor or mentee other than that both parties are or were licensed resource parents or kinship caregivers in the State of NJ. By signing this agreement, Participant (Mentor/Mentee) agrees that **embrella** is not responsible for any damages or claims that may result from the Mentor/Mentee interactions under this program.

I understand that my role is to:

- Provide emotional support and encouragement to assigned mentees
- Maintain regular, agreed upon contact with assigned mentees following contact requirements listed in the Heart to Heart Mentor Guide
- Share my personal experiences to the extent that I am comfortable, respecting the confidentiality of those involved
- Refer to an **embrella** staff member when appropriate
- Connect kinship caregivers to **embrella**'s local Connecting Families activities
- Submit a Mentor Contact Form for each assigned mentee once per month

I understand that my role is not to:

- Provide information on Division of Child Protection & Permanency (CP&P) policies and procedures
- Provide legal advice to resource parents
- Advocate on behalf of the mentee with CP&P or any other agency

Confidentiality:

I also understand that any information shared with me in my role as a mentor is to be held in strict confidence, but may be disclosed and/or discussed with appropriate members of **embrella**'s staff as it pertains to the mentoring program, with the exception of mandatory reporting as stated below.

Mandated Reporting:

I acknowledge that in New Jersey, any person having reasonable cause to believe that a child has been subjected to abuse and/or neglect or acts of abuse and/or neglect, must immediately report this information to the State Central Registry (SCR) **1.877.NJ.ABUSE (1.877.652.2873)**.

Print Name

Signature

Date

Please contact Lenore Bonilla at lbbonilla@embrella.org or phone 609.250.6439 with any questions regarding the Heart to Heart program.