

WPATH Mentorship Agreement

Mentor Name (print): _____

Email: _____

Mentee Name (print): _____

Email: _____

This document is to clarify the agreement for Mentorship requested by the above Mentee with above Mentor for the purpose of completing the Mentorship requirement (10 hours or more) for the WPATH GEI Certification Program.

This agreement is for Mentorship under the WPATH GEI Certification Program only. Completion of this requirement is not a guarantee or assurance of any other part of the WPATH GEI Certification Program and the Mentee is responsible for identifying and meeting the additional requirements through WPATH.

The Mentee and Mentor agree and understand that the term Mentee is used by WPATH to describe what similar organizations in mental health fields refer to as “Consultants” and “Case Consultation,” rather than “Supervisor” and “Supervision.” All parties to this contract understand and agree that the Mentor does not necessarily have access to the Mentee’s case notes or files and for the purposes of this contract is not responsible for the Mentee’s full case load as the Mentor only provides case consultation on the limited number of cases that the Mentee chooses to seek consultation for specially for GEI WPATH Certification.

The Mentoring will include case discussions that will help the Mentor evaluate the Mentee’s competency through demonstration of understanding the WPATH Competency-Based Domains (Caregiver/Care Receiver Relationship, Content Knowledge, Interdisciplinary Practice, and Professional Responsibility); their ability to discuss how care could have been improved; their ability to discuss how care could have been more compromised. Mentees will be expected to demonstrate their competency and understanding of the SOCv7 in clinical practice, be willing to follow WPATH Ethics, and be able to adhere to WPATH's mission and vision.

The Mentor will complete an assessment of the Mentee and will review this tool with them before submitting to WPATH to add to their file as evidence of completion of the Mentoring requirement. In the event that the Mentor encounters issues with their Mentee’s capabilities in the items listed above, the Mentor will bring their concerns to the WPATH Mental Health Mentor Group for discussion prior to completing the mentoring process.

The 10-hours will be delivered in a manner (live, phone, video) agreed to between the parties (Group Hours Equivalent: 2 hours in a group setting of more than 6

members = 1 hour individual, 1.5 hours in a group setting of 5 or less members = 1 hour individual. For mentees that are attending a mentorship group, at least 2 of the 10 mentorship hours must be delivered during 1-on-1 sessions with the Mentor. These parameters are flexible based on the expertise and observation of the Mentor.)

Both parties have agreed that the charge for the Mentoring is \$_____ per hour.

During the life of this contract the Mentee agrees to keep state licensure and professional liability insurance current and in force. If the Mentee allows any of the above to lapse, this contract may be terminated at the sole discretion of the Mentor. In such case, any monies that have been paid are non-refundable and this could also mean that the hours accumulated from the time of lapse could be voided. The Mentee also agrees to inform the Mentor if a complaint, grievance or lawsuit is filed against the Mentee during the term of this contract.

Mentee agrees to send a copy of their license and malpractice insurance with this signed contract.

Mentor Signature: _____

Date: _____

Mentee Signature: _____

Date: _____