Request for Mentor Reassignment

The colleague working most closely with you is your mentor. Through the application and selection process, your mentor has exhibited knowledge of teaching and learning; a willing disposition suited to support novice teachers; and demonstrated leadership as an exemplary educator. However, if the mentor selected for you is not supporting you effectively, you may request a reassignment.

The Mentor Reassignment process:

1. Contact the program leadership to request for the *"Request for Mentor Reassignment"* form. Complete this form and return to the program director.
2. The program director will conduct an interview to clarify the issues surrounding the reconsideration of the mentor partnership.
3. Based on the interview, the program director will propose in writing a resolution which may involve **any** of the following:
   - Facilitate meetings with the candidate and the mentor to discuss possible resolutions to the problem presented.
   - Work with the site administrator to facilitate the selection of a new mentor
   - Continue working with the original mentor with additional support and oversight by the program director for a prescribed period of time after which the partnership is re-evaluated.
   4. The final decision is collaborated on by the program director, mentor and candidate. The Candidate, mentor, and program leader will sign the agreement. The program   director. This will put into action the agreed upon resolution in a timely manner.

Newark Teacher Induction Program

REQUEST FOR MENTOR REASSIGNMENT

Date:_____

Candidate: _____ Mentor: _____

I would like to request a change of mentor assignment for the following reason/s:

Signature: _____

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For Program Use only

Interview date: _____ at _____

Initial Resolution:

❏ Arrange a meeting with candidate and/& mentor to further discuss the situation
❏ Continue partnership until_____ & to be reevaluated on _____
❏ Reassign mentor - candidate partnership.

Final Resolution

❏ Continue partnership
❏ Reassign mentor-candidate partnership

Acknowledged by:

_____   _____   _____
Candidate/Date   Mentor/Date   Program Director/Date