



## The Rite Journey Parent Consent for Mentor



**THIS FORM IS TO BE RETURNED TO THE RITE JOURNEY TEACHER OF YOUR CHILD'S CLASS BY WEEK 3, TERM 1 OF 2023**

Student name: \_\_\_\_\_ Parent/Caregiver name: \_\_\_\_\_

Mentor name: \_\_\_\_\_ Contact number for mentor: \_\_\_\_\_

Contact email for mentor: \_\_\_\_\_

Brief description of The Rite Journey Mentor Project:

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### Mentor Requirement Checklist:

The mentor we have chosen:

- Is the **same gender** as my child
- Is **at least 25** years of age
- Is **not** an immediate family member (i.e. parent, grandparent or sibling)?
- Is able to meet with my child for a total of **at least 18 hours** over the year (ideally **regular contact** of a couple of hours a month).
- Is willing to help my child complete **The Rite Journey Mentor Project and Poster** & sign my child's logbook
- Is willing to be **contacted** by my child's parents and teachers if required
- Is willing to attend **The Rite Journey Homecoming Ceremony** in Term 4

I, the parent(s)/caregiver(s) of \_\_\_\_\_, in collaboration with my child, have selected the person named above to act as mentor for my child. This person has indicated a willingness to act in this role and meets the above requirements for a mentor.

Parent/caregiver signature: \_\_\_\_\_ Date: \_\_\_\_\_