UConn IDEA Grant imagine / develop / engage / apply

## UConn IDEA Grant Supervision and Mentor Agreement



Student Name:	
Mentor Name:	
Department:	
Phone:	Email:

Project Title: \_\_\_\_\_\_

- Short-term and long-term goals of the student's project have been discussed in detail. The mentor agrees that the proposed plan, including the timeline and budget, is feasible.
- □ We agree on the audience(s) with whom the final product will be shared, and how the work will be presented.
- Meetings have been scheduled at regular intervals to discuss the project during the period the work is taking place. We have planned how we will communicate (in person, telephone, email) during these sessions. There is an understanding of the mentor's availability for consultation, if necessary, between scheduled meetings.

Student Signature:	_ Date:
Mentor Signature:	_ Date:

A signed copy of this agreement must be submitted to the UConn IDEA Grants Program Coordinator prior to IDEA Grant award disbursement.