

義守大學教師諮詢領航同意書

(雙方親簽後，彌封後由諮詢教師送至學生事務處諮商輔導組)

領航教師_____同意提供諮詢教師_____「績效評鑑之輔導暨服務表現」個別諮詢服務；諮詢教師於諮詢期間同意提供完整訊息，且雙方均願意嚴守保密義務，非經當事人同意，不得提供及發表相關資料。

領航教師：_____ 簽章
本職單位：_____
分機：_____
電子郵件信箱：_____
聯絡電話：_____
日期：_____年_____月_____日

諮詢教師：_____ 簽章
本職單位：_____
分機：_____
電子郵件信箱：_____
聯絡電話：_____
日期：_____年_____月_____日

(※本同意書僅供學生事務處檢核追蹤用，不會做其他用途，請放心簽名)

I-SHOU UNIVERSITY

Consent for Participation in Mentoring Program for Counseling and Service

(To be submitted by the mentee in sealed envelope to the Counseling and Guidance
Section of the Office of Student Affairs after signed by both the mentor and the mentee.)

I, _____, the mentor, hereby agree to offer _____, the
mentee, individual counseling on his/her performance on counseling & service
under the faculty evaluation. The mentee agrees to provide complete information
during counseling sessions, and the mentor and the mentee agree to keep
confidential all information they learn during the course of their counseling. No
release or publication of relevant information shall be allowed, unless approved
by the mentee.

Mentor: (Signature/Seal)
Department:
Ext.:
Email:
Contact Phone No.:
Date: (mm/dd/yyyy)

Mentee: (Signature/Seal)
Department:
Ext.:
Email:
Contact Phone No.:
Date: (mm/dd/yyyy)

(This consent is only for inspection and follow-up by the
Office of Student Affairs. Please feel at ease to sign.)