



**HARVARD UNIVERSITY
DAVID ROCKEFELLER CENTER
FOR LATIN AMERICAN STUDIES**

Mentoring and Language Acquisition in Brazil (MLAB) Program:

Mentor Agreement Form

I, _____, commit to mentoring a Brazilian high school student for the Mentoring and Language Acquisition in Brazil (MLAB) program, offered by Harvard University's David Rockefeller Center for Latin American Studies (DRCLAS) Brazil Studies Program, from October 2019 – February 2020.

I understand that I am expected to participate in biweekly mentoring sessions, in addition to occasional virtual MLAB-wide meetings throughout the abovementioned period. Furthermore, I agree to participate in all immersion activities in São Paulo, Brazil, from January 9 – 23, 2020.

I declare that I read and understood this mentor agreement. I will abide by this agreement for the duration of the program.

Signature: _____

Name: _____

Date: _____

MLAB Standards and Guidelines

I, _____, agree with and will follow all the MLAB rules and regulations during the MLAB Immersion in São Paulo in January 2020. I understand that the observance of these rules will contribute to the program's success and the overall good of its participants (Brazilian or otherwise), which include minors under the age of 18. During the MLAB Immersion (January 9 – 23):

- 1) I will respect and follow all Brazilian laws;
- 2) I will participate in all program activities;
- 3) I recognize that smoking and the consumption of alcohol will not be permitted during program activities;
- 4) I recognize that the use of narcotic/hallucinogenic drugs or chemicals is forbidden, whether locally legal or not;
- 5) I recognize that sleeping accommodations will be separated by sex, and no mixed rooms will be permitted;
- 6) I recognize that intimacy/sexual relations between program participants is forbidden throughout the program, just as it is forbidden between participants and coordinators.

I declare that I read and understood these rules and I will abide by them for the duration of the MLAB Immersion.

Signature: _____

Name: _____

Date: _____