

義守大學教師諮詢領航辦法

104年06月05日校長核定公告全文

第一條 為提升教師輔導與服務能力，依據義守大學教師績效評鑑辦法第十八條規定，特訂定本辦法。

第二條 前一學年度教師績效評鑑輔導暨服務基本表現未達六十分之本校專任教師(以下簡稱諮詢教師)，應於接獲評鑑通知日起算十四日內，填具「教師諮詢領航同意書」，向學生事務處諮商輔導組(以下簡稱諮輔組)申請領航教師進行諮詢活動；未申請者，須於接獲評鑑通知日起算十四日內，填具「放棄參與教師諮詢領航聲明書」，提交諮輔組備查。

第三條 為執行教師諮詢領航工作，由諮詢教師之主聘系所推薦在教師績效評鑑中輔導暨服務表現良好之專任教師一名，擔任諮詢教師之領航教師。

第四條 領航教師得依實際情形提供商請、電話或電子郵件等個別諮詢服務之輔導方式，與諮詢教師共同探討原因及改善方針。

第五條 個別諮詢實施流程如下：

- 一、諮詢教師應於期限內繳交「教師諮詢領航同意書」至諮輔組。
- 二、領航教師於每次諮詢後應填寫「領航教師工作紀錄表」，紀錄諮詢內容、輔導暨服務強弱項及改善方式等相關事項，一學期至少三次，並於六月底前提交諮輔組備查。
- 三、諮詢教師與領航教師應共同完成「輔導成效回饋表」，於六月底前提交諮輔組備查。

第六條 參與個別諮詢之領航教師及業務相關人員，應嚴守保密義務，非經當事人同意及依法應提供者外，不得提供及發表相關資料。

第七條 為維持領航教師進行諮詢輔導品質，每學年以接受諮詢案件一件為原則。

第八條 本辦法經校務會議審議通過，陳請校長核定後自公告日實施。

Regulations for Mentoring Program for Counseling and Service at I-Shou University

Ratified and promulgated by the President on June 5, 2015

- Article 1 The Regulations for Mentoring Program for Counseling and Service at I-Shou University (hereinafter referred to as the “Regulations”) are established pursuant to Article 18 of the Regulations for Faculty Evaluation at I-Shou University with the aim of enhancing faculty members’ competences on student counseling and service.
- Article 2 Should a full-time faculty member (hereinafter referred to as the “mentee”) has not scored at least 60 points for the basic performance on counseling & service of the faculty evaluation in the previous academic year, he/she shall make an application for mentoring to the Counseling and Guidance Section of the Office of Student Affairs (hereinafter referred to as the “Section”) by submitting a completed consent form within fourteen days of being informed of the faculty evaluation results. If a mentee intends not to apply for mentoring, he/she shall submit a completed waiver agreement to the Section for future reference within fourteen days of being informed of the faculty evaluation results.
- Article 3 To execute the mentoring program, the department (institute) by which a mentee is primarily appointed shall recommend a full-time faculty member who has performed well on counseling & service as the mentor.
- Article 4 Depending on actual needs, a mentor may offer individual counseling to a mentee through a face-to-face interview, by phone, via email, etc., discussing possible reasons and workable solutions with the mentee.
- Article 5 Individual Counseling Procedure:
1. A mentee shall submit a completed consent form to the Section within the prescribed period.
 2. A mentor shall fill out a counseling record sheet after every counseling session, including a counseling summary, the mentee’s strengths and weaknesses, improvement suggestions, etc. Mentors and mentees shall meet at least three times per semester, and counseling record sheets shall be submitted to the Section at the end of June for future reference.
 3. Mentors and mentees shall jointly complete a feedback form on mentoring effectiveness, and submit it to the Section at the end of June for future reference.
- Article 6 Under all circumstances, mentors and administrative personnel involved in individual counseling shall protect the confidentiality of any information they are entrusted with.

No release or publication of relevant information shall be allowed, unless approved by the mentee concerned or required by law.

Article 7 To maintain good mentoring quality, every mentor will offer counseling to only one mentee every academic year.

Article 8 The Regulations become effective on the third day of promulgation after being adopted by the University Council and ratified by the President.

Note: In the event of any dispute or misunderstanding as to the interpretation of the language or terms of the Regulations, the Chinese language version shall prevail.

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.)

放棄參與教師諮詢領航聲明書

(本人與系主任親簽後，由本人彌封後送至學生事務處諮商輔導組)

本人_____已充分瞭解義守大學教師諮詢領航辦法規定內容，自願放棄參與「教師諮詢領航」個別諮詢服務與相關權益。

特此聲明

諮詢教師： (簽章)

本職單位：

分 機：

電子郵件信箱：

聯絡電話：

系主任： (簽章)

中 華 民 國 年 月 日

(※本聲明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)

Waiver of 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 department chair and mentee.)

I, _____, the mentee, have carefully read and understand the Regulations for Mentoring Program for Counseling and Service at I-Shou University, and I hereby voluntarily relinquish the right to receive individual counseling on counseling and service as well as relevant benefits.

Mentee: _____ (Signature/Seal)

Department: _____

Ext.: _____

Email: _____

Contact Phone No.: _____

Department Chair: _____ (Signature/Seal)

Date: _____, _____ (mm/dd/yyyy)

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

Mentoring Program for Counseling and Service Counseling Record Sheet (Mentor)

※ This sheet is only for inspection and follow-up by the Office of Student Affairs.

Mentor: Department (Institute): Academic Rank:	Mentee: Department (Institute): Academic Rank:					
Date:	Location:	Time:	(H)	(M) ~	(H)	(M)

Counseling Summary / Improvement Suggestions

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

Mentor's Signature <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Mentee's Signature <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
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輔導成效回饋表

※此表僅供學生事務處檢核追蹤用

第一部分：基本資料(由雙方填寫)

領航教師	系所		職稱	
	姓名		職號	
諮詢教師	系所		職稱	
	姓名		職號	

第二部分：自我評估(由諮詢教師填寫)

(本表可自行延伸)

輔導事項	具體輔導作為	達成率(%)
1. 校內服務 (含系所服務與學校工作)		
2. 學生輔導(含賃居訪視)		
3. 校外服務		
4. 其他		

第三部分：輔導成效總評(由領航教師填寫)

輔導成效與回饋(至少 300 字)

領航教師簽章：_____

諮詢教師簽章：_____

諮詢教師系(所)主管簽章：_____

填寫日期： 年 月 日

(本表請雙方共同完成，簽名彌封後，由領航教師繳交至學生事務處諮商輔導組，謝謝您!)

Mentoring Program for Counseling and Service

Feedback Form for Mentoring Effectiveness

※ This form is only for inspection and follow-up by the Office of Student Affairs.

Part I: Personal Information (Filled in by the mentor and the mentee, respectively)

Mentor	Dept. / Institute		Academic Rank	
	Name		Faculty ID No.	
Mentee	Dept. / Institute		Academic Rank	
	Name		Faculty ID No.	

Part II: Self-Evaluation (Filled in by the mentee)

(Add additional rows if necessary)

Counseling Category	Concrete Counseling Interventions	Achieving Rate (%)
1. On-campus Services [for both departments (institutes) and the University]		
2. Student Counseling (including visiting students living off campus)		
3. Off-campus Services		
4. Others		

Part III: Overall Effectiveness Assessment (Filled in by the mentor)

Counseling Outcomes and Feedback (at least 300 words)

Mentor's Signature: _____

Mentee's Signature: _____

Chair (Director) of the Mentee's Department (Institute): _____

Date: _____, _____ (mm/dd/yyyy)

(To be submitted by the mentor in sealed envelope to the Counseling and Guidance Section of the Office of Student Affairs after filled in by both the mentor and the mentee. Thank you for your kind cooperation!)