Click here to enter text.



**Mentee’s Name and Building:**

**Mentor’s Name and Building:**

Click here to enter text.

**Record mentor interactions on the chart below with a brief description of each session.**

**This document is to be submitted in word format only, no handwritten forms.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Record of Interaction** | | | |
| **Date** | **Start Time** | **End Time** | **Description** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Collaborate with mentee to determine their professional learning needs and provide assistance with accessing available resources, including but limited to:   * Instructional coaches * Curriculum * Professional Learning Department * Instructional Technology * Data Analysts   Circle the area in which you provided assistance. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Conduct (1) classroom observations: (1) mentor |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Conduct (1) classroom observations: (1) mentor |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Joint planning session(s) to consider learner expectations, assessment practices, time management, etc. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Discuss professional growth tools related to MEES. (See artifacts in Toolbox) |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Conduct a search of effective classroom management strategies. Develop a classroom management plan. Submit classroom management Plan. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Brainstorm methods to enhance positive parent communications |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Attend collaborative mentor training session, check mentee progress with documentation, and establish timeline for completion. |
| **List Other Interactions** | | | |
| **Date** | **Start Time** | **End Time** | **Description** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

**Complete this form, print and sign using blue or black ink only.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Teacher’s Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mentor’s Signature Date**