

## Watervliet City Schools - Monthly Mentor/Intern Report

Today's Date: \_\_\_\_\_

Month of Report: \_\_\_\_\_

**(CHECK WHO SUBMITTED THE REPORT)**

\_\_\_\_Mentor's Name: \_\_\_\_\_ Subject: \_\_\_\_\_

\_\_\_\_Intern's Name: \_\_\_\_\_ Subject: \_\_\_\_\_

Building/grade level: \_\_\_\_\_

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Please list all dates and times of mentoring activities including: meetings, observations, conferences, seminars, etc.

Date	Time Started	Time Ended	Description of Activity	MTIP Hours*	Reg Hours
<b>TOTAL HOURS</b>					

Mentor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Intern's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*MTIP Hours are for A level interns/mentors and should only be counted when a substitute is used.**