## Mentor Contact Log



School District 148

Mentor's Name:

Mentee's Name:

Date	Time In	Time Out	Total Time	Focus Of Visit

Date Submitted:

Mentor's Signature\_\_\_\_\_

Mentee's Signature\_\_\_\_\_

Principal's Signature\_\_\_\_

All forms **<u>must</u>** be submitted to the District Mentor/Induction Coordinator <u>before</u> May 1.