Mentor _____________________________ Discipline _____________________________

Mentee _____________________________ Discipline _____________________________

Please check each item completed during the mentoring process. Use the Comments section of the form for general remarks or for a brief explanation of why certain activities could not be completed. Please note that all aspects of this process are kept confidential.

As soon as possible after my mentor was assigned to me, he/she:

___ contacted me, and we exchanged phone numbers, email information, office hours, etc.
___ verified that I had an ACC phone number and email account

Early in the semester, we met in person and discussed the following:

___ the course syllabus for each course I taught
___ an overview of each course taught
___ possible first day handouts and activities
___ my mentor's personal teaching philosophy
___ possible teaching methods and techniques
___ ACC faculty support services (Professional Development, Library Services, Tutoring Labs, duplication on site)
___ ACC policies and procedures (faculty evaluation, faculty handbook, grading policies, student handbook, copyright, plagiarism, etc)

Within the first three weeks or so of the semester, we discussed/completed the following:

___ student retention strategies
___ test construction tips/strategies
___ classroom management issues (time management, discipline, etc)
___ instructional techniques/strategies (handouts, overheads, special topics, etc)
___ scheduled my mentor's visit to my class
___ I observed my mentor's class

About the middle of the semester, my mentor:

___ discussed my classroom successes or difficulties with me
___ reviewed the student evaluation/faculty evaluation process
___ my mentor observed my class

Within the last three weeks of the semester:

___ had a final meeting with my mentor
___ completed this Mentee Checklist
___ discussed end-of-semester grading policies and procedures

Comments:

Mentee Signature ___________________________________________ Date _____________________________

Once completed, return this form to your Department Chair.