



### Mentee Activity Report

#### **2015-2016 Academic Year**

Mentee Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mentee Email: \_\_\_\_\_ Student Year: \_\_ 1L \_\_ 2L \_\_ 3L \_\_ 4L

Mentee Address: \_\_\_\_\_  
Street/ City/ State/ Zip Code

Anticipated Graduation Date: \_\_\_\_\_

Mentoring Group Name: \_\_\_\_\_ Report Date: \_\_\_\_\_

- Please list the activities in which you participated during the 2015-2016 Academic Year.
- There should be 3 to 5 experiences between September and March *in addition to* your participation in the three Mentoring Breakfasts (October 9, 2015, November 6, 2015, and March 11, 2016).
- At least one experience should include a Networking or other law-related social event that requires interpersonal communication skills.
- Use as much space as needed to provide details about your experience and describe how it met the learning outcomes for the Mentoring Program.

The Mentoring Program Learning Outcomes By the end of the academic year, law students who participate in the Mentoring Program should:

1. Plan for the transition from law student to lawyer, including time management skills and goal-setting;
2. Create and maintain a mentoring relationship with a colleague;
3. Understand strategies to manage: clients, cases, projects, and employees;
4. Practice preparation techniques in professional settings, such as meetings, hearings, depositions, trials, business transactions;
5. Prepare strategies to address novel situations as they arise in the business and practice of law.

See last page for instructions on submitting this form when completed.

Mentee Name: \_\_\_\_\_

Activity Event #1

Activity Event Date: \_\_\_\_\_

Describe the Activity in which you participated: \_\_\_\_\_

List the name(s) of Mentor(s) involved in this activity: \_\_\_\_\_

List which Learning Outcome(s) were satisfied by this Activity: \_\_\_\_\_

Comments: \_\_\_\_\_

Activity Event #2

Activity Event Date: \_\_\_\_\_

Describe the Activity in which you participated: \_\_\_\_\_

List the name(s) of Mentor(s) involved in this activity: \_\_\_\_\_

List which Learning Outcome(s) were satisfied by this Activity: \_\_\_\_\_

Comments: \_\_\_\_\_

Activity Event #3

Activity Event Date: \_\_\_\_\_

Describe the Activity in which you participated: \_\_\_\_\_

List the name(s) of Mentor(s) involved in this activity: \_\_\_\_\_

List which Learning Outcome(s) were satisfied by this Activity: \_\_\_\_\_

Comments: \_\_\_\_\_

Activity Event #4

Activity Event Date: \_\_\_\_\_

Describe the Activity in which you participated: \_\_\_\_\_

List the name(s) of Mentor(s) involved in this activity: \_\_\_\_\_

List which Learning Outcome(s) were satisfied by this Activity: \_\_\_\_\_

Comments: \_\_\_\_\_

Mentee Name: \_\_\_\_\_

Activity Event #5

Activity Event Date: \_\_\_\_\_

Describe the Activity in which you participated: \_\_\_\_\_

List the name(s) of Mentor(s) involved in this activity: \_\_\_\_\_

List which Learning Outcome(s) were satisfied by this Activity: \_\_\_\_\_

Comments: \_\_\_\_\_

**Thank you for taking time to complete this Report. Please return the Report by February 19, 2016 to:**

By email: [minicucc@nova.edu](mailto:minicucc@nova.edu)

By US Mail:

Elena Rose Minicucci, J.D.

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Nova Southeastern University

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Fort Lauderdale, FL 33314

Questions: Call Elena Minicucci at 954-262-6303