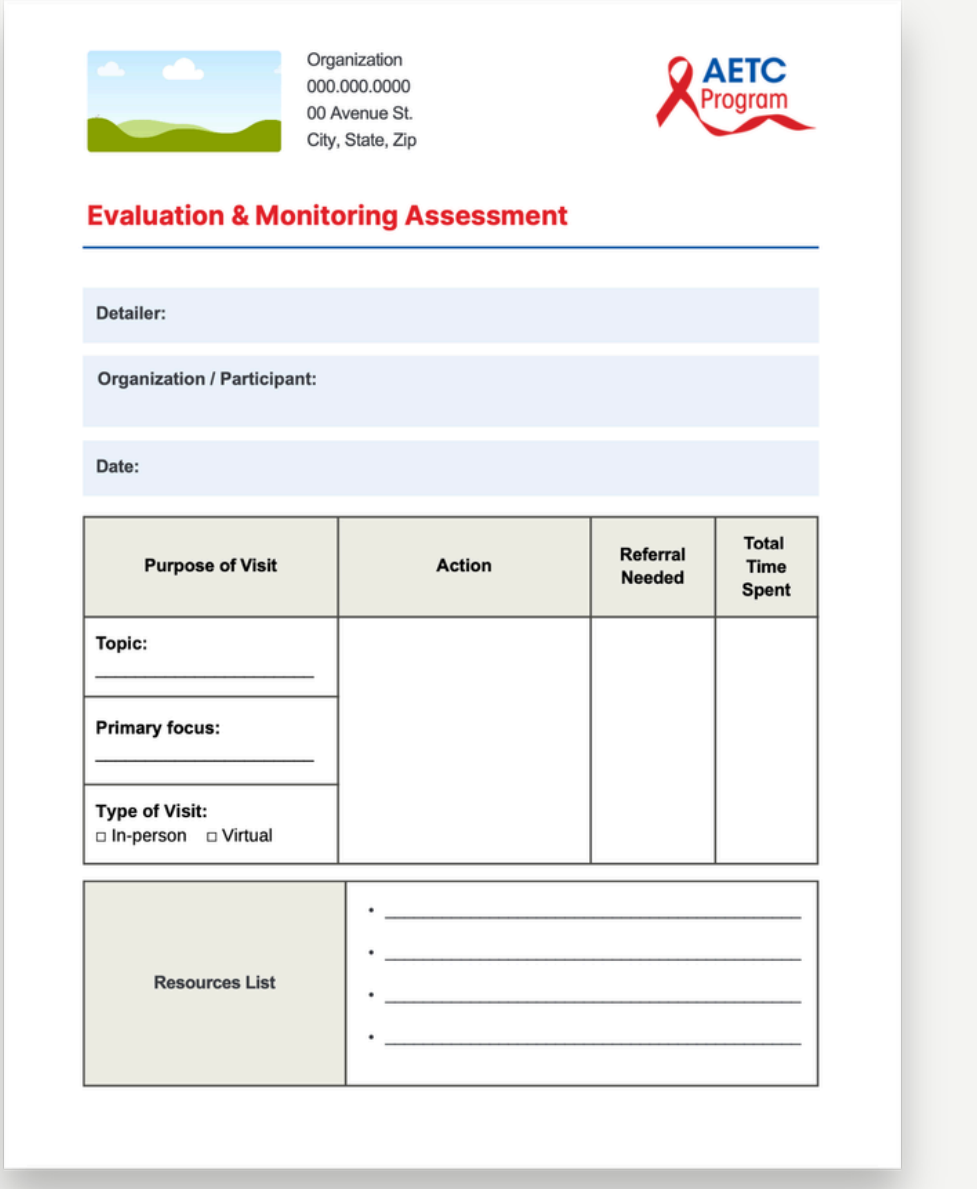
# Mentoring Assessment
## (Example Template)

DOWNLOAD

Template



Organization
000.000.0000
00 Avenue St.
City, State, Zip

AETC Program

### Evaluation & Monitoring Assessment

**Detailer:**

**Organization / Participant:**

**Date:**

| Purpose of Visit | Action | Referral Needed | Total Time Spent |
|---|---|---|---|
| **Topic:** _____ | | | |
| **Primary focus:** _____ | | | |
| **Type of Visit:** ☐ In-person ☐ Virtual | | | |

| Resources List | • _____<br>• _____<br>• _____<br>• _____ |
|---|---|