



KIDS HOPE USA

Daily Progress Report

Mentor's Name: _____ Student's Name: _____

Teacher's Name: _____ Date: _____

HOW DID YOU SPEND YOUR KIDS HOPE USA HOUR? (Fill in only what you did, using this as a guide.)

1. RELATIONSHIP BUILDING ACTIVITIES (circle all that apply)

Book About Me "How are you Feeling?" face chart "Know what?" stories

Snack and share General conversation Other: _____

2. ACADEMIC ACTIVITIES

Reading: _____ Math: _____

Spelling: _____ Other: _____

3. CREATIVE PLAY (Educationally based play time)

Games: _____ Art: _____

Other: _____

4. FREE PLAY (What did you do just for fun?)

How did your Student respond? Scale of 1 (needs improvement) to 5 (outstanding)

Attitude: 1 2 3 4 5

Motivation: 1 2 3 4 5

Cooperation: 1 2 3 4 5

On-task: 1 2 3 4 5

Completion: 1 2 3 4 5

Attentive: 1 2 3 4 5

Any concerns:

What is your response to this session? Scale of 1 (discouraged) to 5 (encouraged)

1 2 3 4 5

Anything memorable happen today? (quote, joy, humor?)

I would like further assistance and/or communication about the following needs related to the child I mentor:

ACADEMIC PROGRESS SOCIAL NEEDS PHYSICAL NEEDS EMOTIONAL ISSUES

I would like to speak to the director / teacher (circle as needed)

I may be reached at:

Phone _____ E-mail _____

If this is an issue that needs immediate attention, please call the director or talk to the principal before leaving the school.