



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

By US Mail:

Elena Rose Minicucci, J.D.

Director of Alumni Relations/Mentoring Program Director

Nova Southeastern University

Shepard Broad College of Law – Room 136-C

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Fort Lauderdale, FL 33314

Questions: Call Elena Minicucci at 954-262-6303