



Peer-to-Peer Mentor Project

Deliverables Documentation Form

Mentor Name: _____

Mentee Name: _____

Date: _____

Timing: _____

Deliverables Addressed (Professional Development Planning, Site Visit, Telephone/Email communications)

Professional Development Plan Items Discussed:

Next Steps / Action Plan:

Completion Dates Discussed:

Attach this page with your request for stipend submission. Request for Stipends should be received by June 5, 2009. Fax your stipend request forms and supporting documentation to ATT: Lenora Bruce at 530-752-6135.