

Verification of Mentoring Hours

Student: _____ Mentor: _____

I *can* verify that _____ (student name) spent at least fifteen (15) hours with me personally while I mentored her/him as a component of the Narragansett High School Senior Project segment of the Proficiency-Based Graduation requirements.

(Mentor Printed Name) _____ (Date) _____

(Signature) _____

I *cannot* verify that _____ (student name) spent at least fifteen (15) hours with me personally while I mentored her/him as a component of the Narragansett High School Senior Project segment of the Proficiency-Based Graduation requirements. I can verify that he/she spent _____ hours with me.

(Mentor Printed Name) _____ (Date) _____

(Signature) _____

Please return this signed sheet with the Mentor Evaluation Rubric