CONNECT Mentoring Action Plan

Mentee Name:

Date of session:

|  |  |  |
| --- | --- | --- |
| Session | What will be the focus(es) of this session? *(e.g. building resilience)* | What goal will this help achieve? (*e.g. working towards a job application)* |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |
| **6**  | **Reflect and feedback**Complete end-of-mentoring survey | N/A |