



LOG BOOK

For Mentor Mentee

Name of Mentor:.....

Department:.....

NATIONAL INSTITUTE OF AYURVEDA

(Ministry of AYUSH, Govt. of India)

Jorawar Singh Gate, Amer Road, JAIPUR-302002 (Raj.)

Tel: 0141-2635292, 2635740, 2635744(EPABX), Fax: 2635709

Website : www.nia.nic.in, E-mail nia-rj@nic.in

Mentor Mentee Policy of Institute

National Institute of Ayurveda is the premier Institute for Ayurveda teaching, research and health care. Institute is dedicated for continuous quality improvement and enhancement in teaching, research and healthcare. Students are the base of institute and thus the policies concerned for quality management for students is the prime focus of the institute. Maximum students at National Institute of Ayurveda, Jaipur are from outside Jaipur city or abroad and occasionally they face academic and adjustment challenges. To cope with such problems and to enable them to excel in academics and profession as per their potential, a Mentor Mentee Programme for DANP, UG, PG and Ph.D students of the Institute has been developed.

Objectives:

1. To ensure that students perform academically and professionally up to their potential through mutual support and a congenial learning environment.
2. Academic dean of concerned program may develop mentor mentee programme according to the number of students, faculty members and needs of the discipline as well as of the programme.

Following are the guidelines for the Mentor- Mentee programme:

- A committee of the academic Deans of respective program of the institute chaired by Director of the institute will monitor the Mentor- Mentee programme for successful implementation of the program to achieve the ultimate goal.
- Concerned Dean of the program will look after assignment of the mentee to the mentor
- Dean/ Head of the department will appoint the teacher of the program of specific professional year for the students of that profession year
- The ratio of the mentee: mentor will be as per the ratio of total students of that professional year: teachers teaching the students of respective professional year students.
- In the starting of the academic year, mentees will be allotted mentor by Dean/ Head of the concerned department and the

tenure of the mentor mentee will be upto completion of that professional year.

The mentor- mentee program

- a. Students shall be assigned to Mentors (Teaching faculty) right from the first year of the programme.
- b. A mentor shall have a reasonable number of students as Mentees.
- c. The mentees preferably (may not be possible in some cases) be attached to the same mentor for the entire duration of the programme of study.
- d. The mentor shall meet the mentees regularly and record the outcome of the meeting in the hard copy or in the software, if available. The details about each mentee will be recorded and periodically updated in the system.
- e. The mentor shall identify the students performing exceptionally well in curricular or co-curricular activities and report to the head of the institute/department for providing further motivation to advanced/gifted learners.
- f. The mentor shall also identify the students whose performance/attendance is below par. The mentor shall interact with the student and try to find out the cause of the problem or an indifferent behaviour. If required the mentor will involve the parents, head of the department or the Director for reforming the student.
- g. The mentor shall be a member in the disciplinary committee, if a student (mentee) violates the code of conduct.

Areas of Review:

- a) Attendance: The mentor shall observe and monitor the attendance of the mentee. He/she shall advise and take necessary follow up actions with regard to students who do not meet the attendance norms of the University.
- b) Academic Matters: The mentor shall also keep a track of the academic performance of mentees including continuous assessment, term end examination and help the mentee through counseling or by arranging remedial teaching, if necessary.
- c) Behavioral and discipline matters

- d) Health and physical well being
- e) Achievements, talents and co-curricular activities

4. Duties/ Responsibilities of Mentor

- a) Introduce and discuss the concept of mentor-mentee system with the assigned mentees
- b) Call a meeting of all mentees and record their necessary details in the designated form, note any specific requirement of a student and discuss with them the complete schedule of future meetings.
- c) Keep a track of the attendance, academic performance and behavioral aspects of the student by interacting with the exam department and the hostel authorities etc.
- d) Support students academically and emotionally
- e) Contact parents to inform the progress of their ward, whenever required
- f) Maintain a record of the progress made by the identified underperforming students and take remedial actions wherever required
- g) To guide students and also to arrange for remedial teaching, if required

5. Duties/Responsibilities of Mentee

- a) To attend meetings regularly
- b) To fill personal information in the form at the time of joining the mentor mentee system
- c) To provide details of attendance, continuous assessment, term end examination, co-curricular, extra-curricular activities to the mentor whenever asked for
- d) Repose confidence in the mentor and seek his/her advice whenever required

INDEX

S.No.	Name of Mentee	Page No.
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Personal Information of Mentee:

1. Name:
2. Father's Name:
3. Aadhar Number:
4. Student Enrolment number:
5. Marital Status:
6. Name of program:
7. Program year:
8. Mobile No. of student:
9. Mobile No. of Parent:
10. Email ID of student:
11. Email ID of Parent:
12. Permanent address :
.....
13. Current address :
.....
14. Blood Group:

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee

Name of Mentee :

Name of Mentor :

Date of meeting of Mentor-Mentee :

Assessment by mentor of mentee :

Attributes/Level	Below average	Average	Above average
Regularity in class rooms and hospital			
Performance in study			
Participation in extra-curricular activities			
Physical health status			
Mental health status			
Behavior with teachers and students			

Special need or advice or help required by mentee:

Suggestions/ Remarks by Mentor:

Signature of Mentor

Signature of Mentee