

## **Weekly Meeting Record**

Trainee Name:			
Trainee Name.			
Mentor Name:			
Date of Meeting:			
Discussion		1	Any issues/concerns raised? Any further actions required, and by whom?
How is the trainee's resilience and wellbeing? Is there anything impacting on either of these?			•
Previous targets have been reviewed and evidence provided that they have been addressed by the trainee? (Please ensure noted on Learning Evaluation)			
Key successes/issues/concerns have been discussed from the Learning Evaluation (Teachers' Standards considered)?			
Subject Knowledge Audit reviewed and confirmed			
Targets have been identified with related actions in order that the trainee can work towards achieving these? (Please ensure noted on Learning Evaluation)			
NB: The trainee and the mentor should retain a copy of each Weekly Meeting Record.			
Mentor''s Signature:			
Trainee's Signature:			