|    |   | Spiritual Formation Mentor Report for February - Year:  |                 |                  |                    |                         |
|----|---|---|-----------------|------------------|--------------------|-------------------------|
|    |   | Student ID #:   | Student Name:   |                  |                    |                         |
|    | <b>*</b>  | Spiritual Formation Mentor:   |                 |                  |                    |                         |
| 1. | Areas discussed initiated by the student.   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
| 2. | Areas discussed related to the development of the student's spiritual goals for the Covenant of Learning.         |   |                 |                  |                    |                         |
| 4. | Areas discussed related to the development of the student's spiritual goals for the Covenant of Leaf ling.        |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
| 3. | Areas discussed related to the student's spiritual growth, spiritual disciplines, spiritual leadership, etc.      |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
| 4. | Please rate the student's progress during the past month in the areas listed below by clicking or checking the be |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |
|    |   | *If you mark "Needs Attention," please give specific details in the "Comments" section below. |                 |                  |                    |                         |
|    |   |   |                 | Needs Attention* | Normal<br>Progress | Substantial<br>Progress |
|    | Spiritual gr  | owth  |                 |                  |                    |                         |
|    | Leadership  | development   |                 |                  |                    |                         |
|    | Personal gro  | owth  |                 |                  |                    |                         |
|    | Ability to lis  | sten and accept feedback  |                 |                  |                    |                         |
|    | Awareness of  | of issues he/she needs to be v  | vorking on      |                  |                    |                         |
|    | Progress tov  | ward Covenant of Learning   | spiritual goals |                  |                    |                         |
| 5. | 5. Comments   |   |                 |                  |                    |                         |
|    |   |   |                 |                  |                    |                         |

Your digital signature indicates that you have discussed this report with the student.

Date:

SIGNATURE AND DATE

**Spiritual Formation Mentor:**