

Community Mentor Program Goals

Student Name:

Mentor Name:

Try and use S.M.A.R.T goals (Specific, Measurable, Achievable, Relevant, and Time-bound).

What are you hoping to gain from participating in the Community Mentor Program?

1. _____

2. _____

What are your professional and career goals for this year?

1. _____

2. _____

What are your professional and career goals long term?

1. _____

2. _____

Please submit to the Student Engagement Office BH 155, or scan and email to student-engagement@fvcc.edu.