

# **Mentorship Log**

# SFIC Candidate (Mentee) Information

Full Name	Date
	SFIC Date
Email	SFIC Trainer

### **Mentor Information**

Full Name	Email

# Direct Mentorship (min 8 hrs)

Date	Hours	Mentor	Activity	Summary of Feedback

# Indirect Mentorship (min 4 hrs)

Date	Hours	Mentor	Activity	Summary of Feedback

## Peer Mentorship (min 4 hrs)

Date	Hours	Activity	Individuals Present

**Note:** An additional two hours are required to fulfill the 18 total mentorship hours required for certification. These additional hours can fall under any of the three categories above.

#### **Attestation**

Date	Hours	Mentor	Mentor Signature