# **Weekly Planning Document**

This document is to be completed and uploaded by midnight on the day of your mentor meeting.

The purpose of this document is to make sure that everyone is on the same page regarding what their expectations are for the following week.

Each student will receive a grade between 0-5 for the information in this document. A grading rubric can be found below.

| Grade | Description |
| --- | --- |
| 5 | All information filled out, task information is descriptive, **complete**, and easy to follow. No grammar, formatting or style errors present in the writing. |
| 4 | All information filled out, but there are minor grammar, formatting or style errors OR the task description isn’t sufficiently complete. |
| 3 | All information present, significant presentation (style/grammar/formatting) or description problems. Demonstrates a lack of effort. |
| 2 | Missing information, significant presentation and content issues. |
| 1 | Incomplete and demonstrates a lack of effort |
| 0 | Zero effort / not submitted |

NOTE: Late documents will be penalized by 2 points. Please make sure to turn this in on time.

Clinic Project Information

| Project Name |  |
| --- | --- |
| Mentor Meeting Date and Time |  |
| TA Name |  |
| Internal Mentor(s) |  |

| Are there any plans to meet with the external mentor? If so, please provide the logistics of the meeting (meeting start and end time, in-person? Zoom? Who on both sides will be attending – to the best of your knowledge). |  |
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Each student needs to fill out one block below.

| Student Name:     | Task description. Please make sure to provide details. If there is more than one task, please write them all down. |  | | --- | --- | |
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