Office of Faculty Development  
Department of Pediatrics  
Mentor Committee Meeting Summary Form

This form should be completed by the faculty member mentee at the time of the meeting and submitted as indicated below:

- Submit one copy to your division director
- Submit one copy to Maggie Boss, Office of Faculty Development: maggie.boss@chp.edu

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Faculty name: _______________________________  Meeting Date: __________

Division director: _______________________________

Academic pathway:  
- Clinician-Leader  
- Clinician-Educator  
- Clinician-Investigator  
- Investigator-Educator  
- Clinical Prefix  
- Research Prefix

Track:  
- Tenure Track  
- Non-Tenure Track

Mentor committee members:

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Topics addressed by mentor committee:  
- Career interests  
- Readiness for promotion/promotion timeline  
- Reviewed CV  
- Academic progress/concerns  
- Research  
- Teaching/mentoring  
- Curriculum development/educational leadership  
- Leadership of clinical programs  
- Reviewed Executive Summary  
- Service  
- Recognition at regional/national level  
- Nomination for society membership or honors. (e.g., ASCI, APS, SPR)  
- Other _______________________________

Action items for mentee with deadlines:

1.  

2.  

3.  