



**Goodwill Industries of Southeastern Wisconsin, Inc.
Abil/Ty Connection Monthly Student Report**

The purpose of this form is to submit your monthly activity to the Abil/Ty Connection Coordinator. If there is insufficient room for your entries, attach an additional page. Please submit your report to the Coordinator no later than the last weekday of each month.. Thank you.

Protégé's Name:	
Mentor's Name:	
DVR Counselor:	

Mentor Contacts

Date	Method of Contact	Subject

School Report

Work Search Report

Date	Employer	Action	Results

Comments/Changes in Contact Information

Signature: _____

Date: _____