

Iowa Model of Excellence Mentoring Program
Mentoring Reimbursement Form
Iowa Alliance for Arts Education - Leon Kuehner, Elizabeth Fritz co-chairs

Please mail this form to: Leon Kuehner, IAAE Mentor Co-chair
977 Glendale Park Drive, Hampton, IA 50441
641-425-0959 leongkuehner@gmail.com

Please complete this form after your mentor visit.
This form should be accompanied by the Mentor Summary form which details your visit with your mentee. Please have your mentee sign the summary form.

Name	Mentor Event
Address	Event Date
City, State, Zip	Member of IAAE? Yes No
Cell phone	Email
Mileage from: <small>(.39 per mile IAAE will verify mileage through MapQuest/Google Maps)</small>	Mileage to:
Mileage from:	Mileage to:
Time Mentor Spent with Mentee in the Classroom/Face to Face <small>(Please Circle One)</small> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">Full Day \$125</div> <div style="text-align: center;">Half Day \$62.50</div> <div style="text-align: center;">Quarter Day \$31.25</div> </div>	Collaborating Organization - Circle One AEI IBA ICA ICDA EDTA IMEA ISTA
<small>(reimbursement not to exceed dollar amount, please provide receipts)</small> Breakfast (\$8.00) Lunch (\$12.00) Dinner (\$23.00)	Meals Total
Lodging (\$75.00)	Lodging total
Mentor Stipend	Mentor Stipend Total
For Office Use Only	
Date Received	Total Meals
	Total Lodging
	Total Stipend
	Total Mileage
Check Number	Grand Total

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Mentoring Summary Form
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Mentor Teacher	Mentee Name and School
Time Mentor Spent with Mentee in the Classroom/Face to Face (Please Circle One) Full Day Half Day Quarter Day	Collaborating Organization - Circle One AEI IBA ICA ICDA IETA IMEA ISTA Member of IAAE? Yes No

Provide a brief narrative of your visit:

What positive effects do you see happening because of your visit?

Mentor Signature:

Mentee Signature
