

## Maryland Freestate Challenge Academy Mentor 's Monthly Report

Cadet Name \_\_\_\_\_ Phone \_\_\_\_\_ Platoon: \_\_\_\_\_ Month: \_\_\_\_\_

Mentor Name \_\_\_\_\_ Phone \_\_\_\_\_

**IS YOUR CADET GOING TO SCHOOL? YES \_\_\_\_\_ NO \_\_\_\_\_**

School Name:	
Location (city)	
Type of School	High School      College 2 or 4 Year      Adult      Other: _____
Date Enrolled:	
DID YOUR CADET EARN A DIPLOMA, CERTIFICATE, OR GED?      Yes _____ No _____	

**IS YOUR CADET WORKING OR VOLUNTEERING? YES \_\_\_\_\_ NO \_\_\_\_\_**

Employer:	Hourly Wage:
Location:	Supervisor:
Occupation:	Phone Number:
Date of Hire:	Date Terminated:
Full or Part Time:	Hours:

**IS YOUR CADET IN THE MILITARY? YES \_\_\_\_\_ NO \_\_\_\_\_**

Branch of Service Army _____ Navy _____ Marines _____ Air Force _____ Coast Guard	
ACTIVE _____      RESERVE _____      NATIONAL GUARD _____	
Enlistment Date:	Discharge Date:
Delayed Entry Date:	Notes:

**CONTACTS: Minimum 4 Hours of Contact? YES \_\_\_\_\_ NO \_\_\_\_\_**

Type of Contact	Date/Hours	Summary of Contact Event

**Mentor's Signature \_\_\_\_\_ Date \_\_\_\_\_**

**IF YOUR CADET IS NOT WORKING OR GOING TO SCHOOL, PLEASE EXPLAIN WHY?**

**DO YOU HAVE ANY COMMENTS OR CONCERNS REGARDING YOUR CADET THAT WE SHOULD KNOW ABOUT OR THAT WE SHOULD CONTACT THEM ABOUT?**

**HAS YOUR MENTOR/CADET INFORMATION CHANGED? IF SO, PLEASE GIVE YOUR NEW INFO:**

**WHO DOES YOUR CADET LIVE WITH? \_\_\_\_\_**

**FREESTATE STAFF ONLY:**

**CASE MANGER NOTES:**

**DATE REPORT TAKEN: \_\_\_\_\_ SPOKE WITH: \_\_\_\_\_**

**WAS THIS REPORT TAKEN BY: \_\_\_\_\_PHONE\_\_\_\_EMAIL\_\_\_\_IN-PERSON\_\_\_\_FACEBOOK**

**VERIFIED WITH: \_\_\_\_\_**

**FCA STAFF MEMBER \_\_\_\_\_DATE ENTERED IN BASE: \_\_\_\_\_**