[](http://education.ohio.gov/)

**Year 4 Resident Educator *Learning to Lead***

*This document shall be completed by the Resident Educator and submitted to Program Coordinator, Sheryl Budd. This document will serve as evidence of your completion of the requirements of year 4 of the Resident Educator program. Please submit this form prior to the end of the school year.*

Name of Resident Educator:

Name of Mentor:

Place & date the leadership activity took place:

Goals/objectives of the leadership activity:

Describe the *Learning to Lead* activity

Description of Leadership Activity

Describe your role in this activity

Reflection: Describe if you accomplished (or not) your goal/objective? Based on feedback from those you worked with, how would you change this activity? What would be your next steps if you led further professional activities?

*Signatures:*

