Your Name: Date: Neighborhood:

Community Development

Please provide highlights of residential education activities happening in your neighborhood:

|  |
| --- |
|  |

Please identify any students of concern in your area and steps you have taken so far to address concerns:

|  |
| --- |
|  |

Policy Concerns

Policies concerns/ violations this week:

|  |
| --- |
|  |

Maintenance concerns:

|  |
| --- |
|  |

Your Week

Please rate your week in each area on a scale of 1-10. **1 = Poor, 10 = Outstanding.** Please use space below to elaborate as necessary.

Personal –

Academic –

Professional –

|  |
| --- |
|  |

Your Staff

Tell me about your highlights and concerns with staff

|  |
| --- |
|  |

Tell me how you spent your 20 hours this week (eg. Time spent in 1 on 1, office hours etc.?)

|  |
| --- |
|  |

How can your AD help you this week?

|  |
| --- |
|  |

Other

|  |
| --- |
|  |