Professional Development Mentoring Checklist - Page 1

Student Name:		Studen	t UID:	
Professional Developme	ent Mentor(s):			
Curriculum Track:				
Project Title:				
Project Mentor(s):				
Prior to enrolling in P3 electives, students must discuss their chosen electives and seek the approval of their assigned professional development mentor(s) within their curriculum track. Students, please answer the following questions prior to meeting with your mentor(s).				
1. Briefly describe your current educational and professional goals. What do you envision doing after graduation?				
of Pharmacy Program in take specialized courses should aid a P3 student	n the P3 student year. The pure, which build upon knowledg	lective courses (5000 or above pose of the P3 elective require gained in the P1 and P2 curreer goals, completing their Plalum track.	ment is to allow students to iculum. The P3 electives	
Identify the elective	courses that you intend to tal	te during your <u>P3 Summer/F</u> a	dl (minimum 3-4 credits):	
Course number	C	ourse title	Credit hours	

Professional Development Mentoring Checklist – Page 2

Identify the elective courses that you intend to take during your **P3 Spring** (minimum 5-6 credits):

Course number	Course title	Credit hours
	-	
lease describe how your choser	n elective courses will help you to achieve yo	ur individual educational and
fessional goals, complete your l	PharmD project, or complement your chosen	curriculum track

STUDENT SIGNATURE:	DATE:
I, educational and professional goals and agree PROFESSIONAL DEVELOPMENT ME	(print name), have discussed the above student's e these electives meet the P3 elective requirements.
	DATE:

Students must return completed forms to the Office of Student Affairs by August 1, 2019

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