School district or building level administrators are to use this form to recommend a teacher to be trained as a Novice Teacher Mentor.

This signed recommendation form must be brought by the prospective mentor to the mentor training or the recommendation can be signed, uploaded to a computer, and emailed by the building level principal to the contact person for the designated mentor training.

I hereby recommend the following individual to be trained in the Arkansas Induction Mentoring Model (AIMM) to become a Certified AIMM Mentor.

Teacher’s Name: __________________________________________________

School / District: __________________________________________________

I hereby assure that the above-named individual has*:

- A current Arkansas Teacher License, unless the requirement for a teaching license is waived by law or in the charter of a public charter school
- A minimum of three (3) years of classroom teaching experience as the Teacher of Record
- Been trained in the Danielson Framework for Teaching
- Been rated as a proficient teacher or the equivalent thereof
- Been recommended by the school district or building level administrator

Signature ___________________________________________ Date __________________________

Position ____________________________________________

*Any exemptions from these requirements must be approved by the Office of Educator Effectiveness.