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| **Table 8: Data Summary Sheets (Optional)*****Mentorship*** *(Since Last Promotion)- (mentorship beyond graduate student supervision/ committees)* | **Candidate’s Name** |       |
| **Primary Division/Department** |       | **Date Submitted** |       |

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| **Mentee**  | **Indicate if Faculty,**  **Graduate Student, Fellow** | **Year****(Duration)****(x to x)** | **Frequency of Meetings****(monthly/ annually)** | **Area of Mentorship****(i.e. research, teaching, advocacy, cpa, QI, work life/wellness)** |
|       |  |       |       |       |
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