**1:1 Meeting Record Template**

**The Supervisor and Volunteer should retain a copy for action items and reference at next 1:1 meeting.**

|  |  |
| --- | --- |
| **Volunteer:** |  |
| **Supervisor:** |  | **Date of meeting:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Agenda items (supervisor)** | **Agenda items (Volunteer)** |
| 1 | What are you enjoying about volunteering with [name of company]? |  |
| 2 | Is there anything that you have not enjoyed or are currently not enjoying? |  |
| 3 | Are you experiencing any difficulties in completing your tasks? |  |
| ~~4~~ | How are you finding the support you receive on the day to complete the task? Is there anything that could be improved? |  |
| 5 | How have you progressed with your work plan? In which areas do you feel very comfortable? In which areas do you think you could benefit from receiving additional support? |  |
| 6 | Is there anything you would like to do with [company name] that you are not currently doing? |  |
| 7 | Have you had any training to help you complete the task or support you while you volunteer with [company name] (i.e. Health and Safety)? How did you find it? What sort of training would you like moving forward to help you make the most out of this volunteering experience? |  |
| 8 | Any other comments: |  |

|  |  |  |
| --- | --- | --- |
|  | **Discussion** | **Action Agreed** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |

|  |  |
| --- | --- |
| **Date of next meeting:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Volunteer’s Signature:** |  | **Date:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Supervisor’s Signature:** |  | **Date:** |  |

**The Supervisor and Volunteer should retain a copy for action items and reference at next 1:1 meeting.**