



TOOLS

Student Mentoring Evaluation

Name: _____ Grade/Class: _____

Mentor: _____

Mentor's Place of Employment: _____

Date: _____

Describe some of the mentoring provided during the various visits. _____

Has your mentor assisted you in focusing on a career goal, work ethics, etc.? Yes No

If yes, describe how. _____

Mentoring sessions were scheduled at School site Worksite Both school site and worksite

Type of help provided through mentoring:

- Employee expectations
- Employer expectations
- Basic academic skills needed in career choice
- Technical skills needed in chosen career
- Interpersonal skills needed for success
- Trends in the job market
- Education needed beyond high school
- Other: _____

Are you interested in continuing your mentor relationship? Yes No Please explain. _____

List some of the important things that you have learned about yourself and your chosen career during this mentoring experience. _____
