**Mentee Evaluation of Mentor**

Mentee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mentor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Please rate your mentor in the following areas:**  | **|---- Rating Scale ----|** |
| **SD** | **D** | **N** | **A** | **SA** | **NA** |
| I had adequate input into the process of being paired with my mentor. |  |  |  |  |  |  |
| I am satisfied with the choice of my mentor. |  |  |  |  |  |  |
| The frequency of our meetings was appropriate for my needs. |  |  |  |  |  |  |
| My mentor was readily available and accessible. |  |  |  |  |  |  |
| My mentor provided valuable feedback and guidance in a timely manner. |  |  |  |  |  |  |
| My mentor assisted me in establishing a professional development plan (e.g., Individual Development Plan “IDP”). |  |  |  |  |  |  |
| My mentor was effective in helping me set achievable goals with timelines and outcome metrics. |  |  |  |  |  |  |
| My mentor guided and encouraged me in my scholarly work (i.e., grant proposals, manuscript writing, research projects.) |  |  |  |  |  |  |
| My mentor had a significant impact on my scholarly work. |  |  |  |  |  |  |
| My mentor helped me gain the necessary skills and resources to achieve my goals. |  |  |  |  |  |  |
| My mentor facilitated my participation in professional activities, societies, and/or networking opportunities. |  |  |  |  |  |  |
| My mentor connected me with other senior faculty or resources to assist me with career and skill development. |  |  |  |  |  |  |
| My mentor advocated on my behalf within the institution, department or division. |  |  |  |  |  |  |
| My mentor observed and offered feedback on my teaching skills. |  |  |  |  |  |  |
| My mentor honored the confidentiality of our meetings. |  |  |  |  |  |  |
| My mentor respected and supported my work-life balance. |  |  |  |  |  |  |
| My mentor exhibited integrity and qualities that I admire. |  |  |  |  |  |  |
| The mentoring relationship met my expectations. |  |  |  |  |  |  |
| I believe this mentoring relationship has improved my overall career satisfaction. |  |  |  |  |  |  |
| I believe this mentoring relationship has had a positive impact on my career success. |  |  |  |  |  |  |
| I believe this mentoring relationship has helped in my personal development. |  |  |  |  |  |  |
| I would like the mentoring relationship to continue. |  |  |  |  |  |  |
| I would recommend this mentor to someone else. |  |  |  |  |  |  |
| SD=Strongly Disagree; D=Disagree; N=Neutral; A=Agree; SA=Strongly Agree; NA=Not Applicable |  |  |  |  |  |  |
| **Please explain any items receiving SD or D:**  |

Reflect on your mentoring relationship and complete the following questions :

1. What were 2 positive outcomes that you received from this mentoring relationship?
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What beneficial changes did you identify in yourself as a result of this mentoring relationship?
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What did your mentor do to positively influence your personal and/or professional development?
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. In what ways could your mentor improve to be a more effective mentor?
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Additional comments or suggestions:

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*Indiana University School of Medicine Faculty Mentoring Resource Website, Office of Faculty Affairs and Professional Development* [*http://faculty.medicine.iu.edu/mentoring*](http://faculty.medicine.iu.edu/mentoring)