

Three Monthly Evaluation of Progress

MTA Guild Mentoring Programme

Mentor:

Participant:

Date: / /

1. Are you still in a mentoring relationship. Y / N

2. If yes, how is the business relationship going for you?

1	2	3	4	5
Does not meet expectations		Meets some expectations		Meets all expectations
Comments: _____				

3. Have you made progress in the Mentoring Plan?

1	2	3	4	5
Little progress		Some progress		Completed

Do you think your mentoring needs will be finished by the agreed completion date?

Please circle: Yes No Too soon to decide

Comments: _____

4. How often have mentoring sessions been held over the previous six months and how long have they taken?

Number of sessions: _____ Average time: _____

Comments: _____

5. What benefits are you receiving from the Mentor and/or the Mentoring Programme?

Please circle: 1) Expert advice 2) Network connections 3) Improved staff relations 4) Increased job focus

Other: _____

6. Do you have any suggestions or recommendations that would contribute to the quality of the MTA Guild Mentoring Programme?

Signed: _____ Signed: _____

Mentor *Participant*

Date: / /

