MENTOR ASSISTANCE PROGRAM EVALUATION FORM

Directions: Indicate the work completed in each of the four (4) areas described below. Submit completed form to building/district administrator for approval.

	Employee's Name:				
	Building:				
	Short Term/Long Term Mentor (i	ndicate which):			
	Employee Mentored:				
Ment	ors and employees shall complete this	s prior to the Ment	ors receiving their stip	end as defined	l in Appendix B.
Expe	ctations:				
a	Mentors and employees shall meet for one half $(1/2)$ day prior to school starting to review classroom expectations, building procedures, grade book software, etc.				
Did you meet with your mentee to review classroom expectations, building procedures, grade boo Yes No					rade book software, etc.?
b	Long Term Mentors and employees shall meet at least once weekly throughout the year. Short Term Mentors and employees shall meet at least once weekly throughout the first semester.				
	Did you complete the required meetings? Yes No				
c	 Mentors and employees shall be released to observe each other's instructional practice three (3) times per year for beginning employees, and one (1) time per year for experienced employees. These release days shall be one half (1/2) day. List the dates of observations occurred: • • • 				
d	List 3-5 topics you discussed with your mentee during the months you worked together: • • • • • • • •				
S	submit completed form to Human Res	ources for paymer	t on next scheduled pa	nyroll.	
	Employee's Signature:			Date:	
	Administrator Signature:			Date:	