Mentee Name: Mentor Name:

Date: Years of mentorship:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | Never | Rarely | Occasionally | Most of  the Time | Always |
| ***Meetings and Communications*** | | | | | | |
|  | Attends scheduled meetings | 1 | 2 | 3 | 4 | 5 |
|  | Accessibility at other times | 1 | 2 | 3 | 4 | 5 |
|  | Professionalism of communication | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| ***Expectations and Feedback*** | | | | | | |
|  | Provides timely and constructive feedback | 1 | 2 | 3 | 4 | 5 |
|  | Helps set expectations & goals | 1 | 2 | 3 | 4 | 5 |
|  | Critiques work effectively | 1 | 2 | 3 | 4 | 5 |
|  | Challenges me to set realistic goals and timelines | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| ***Career Development*** | | | | | | |
|  | Provides advice, direction & encouragement | 1 | 2 | 3 | 4 | 5 |
|  | Helps me determine what I should and shouldn’t take on | 1 | 2 | 3 | 4 | 5 |
|  | Counsels on career advancement & promotions criteria | 1 | 2 | 3 | 4 | 5 |
|  | Advocates on my behalf | 1 | 2 | 3 | 4 | 5 |
|  | Promotes self-reflection | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | Never | Rarely | Occasionally | Most of  the Time | Always |
| ***Admin Support*** | | | | | | |
|  | Assists with setting goals & identifying potential opportunities | 1 | 2 | 3 | 4 | 5 |
|  | Assists in developing new skills (clinical, research, teaching, etc.) | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| ***Clinical Support*** | | | | | | |
|  | Assists with setting goals & identifying potential opportunities | 1 | 2 | 3 | 4 | 5 |
|  | Assists in developing new skills (clinical, research, teaching, etc.) | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| ***Teaching Support*** | | | | | | |
|  | Assists with setting goals & identifying potential opportunities | 1 | 2 | 3 | 4 | 5 |
|  | Assists in developing new skills (clinical, research, teaching, etc.) | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| ***Psychosocial Support*** | | | | | | |
|  | Promotes work-life balance | 1 | 2 | 3 | 4 | 5 |
|  | Respectful | 1 | 2 | 3 | 4 | 5 |
|  | Engaged and actively listens/ participates | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |

**Additional Questions**

Do you have a good fit with your mentor? Yes No

Would you like to change mentors? Yes No

Comments: