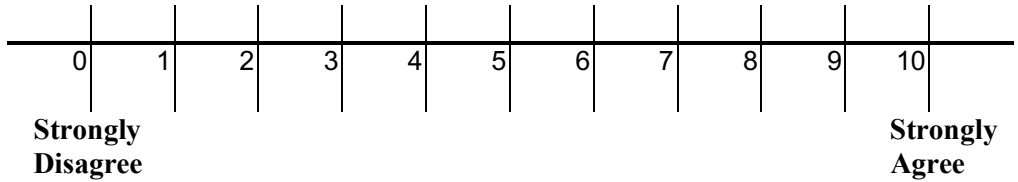


Mentor Evaluation

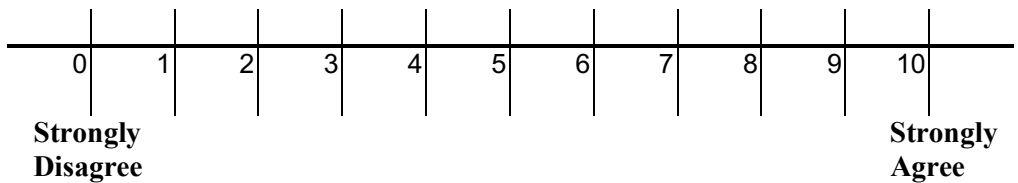
Resident's Name	
Mentor's Name	
Unit of Residency	
Date	

Please rate the following on a scale of 0 to 10 as noted on the scale located beneath each item:

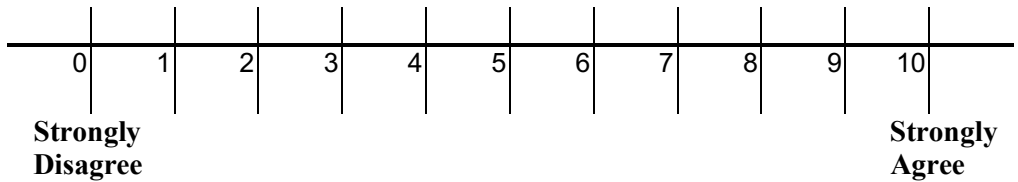
1. The mentor's teaching style was conducive to learning:



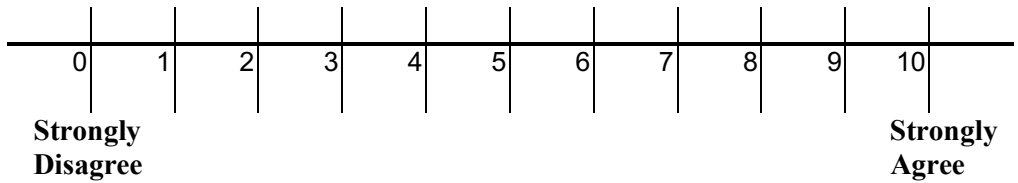
2. The mentor was available for consultation and assistance:



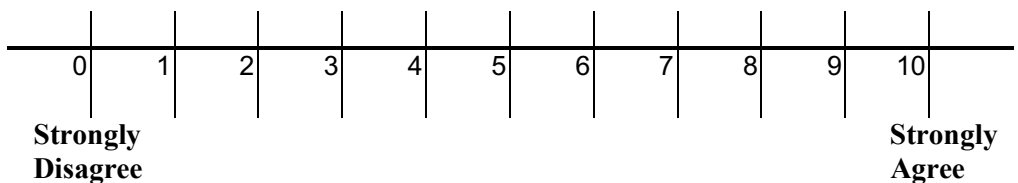
3. The mentor provided useful feedback:



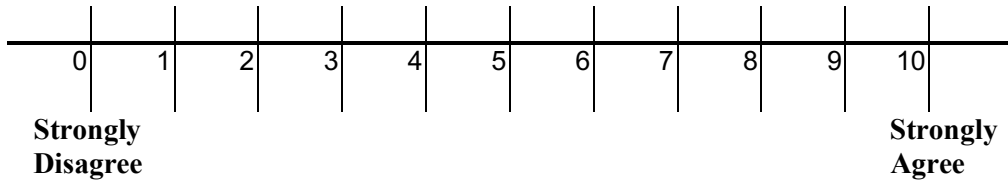
4. Residents knew what was expected of them to succeed in the learning experience:



5. The teaching environment was respectful of individual differences:



6. Residents were encouraged to think critically and independently:



7. Briefly describe, in general, how the Mentor could better serve your needs:

8. Follow up/ Plan:

9. Additional comments:

Resident's Signature	
Mentor's Signature	
Coordinator's Signature	