EVALUATION OF MENTORING WITH  Mentor's name
Comments from:
Date:
Please respond to the following items on both sides of the page frankly and fully. Use another sheet if there is insufficient room for your responses.
What has been the most valuable aspect of the mentoring sessions for you in the past year?
From your point of view, what has not gone as well as you had hoped with the mentoring sessions?
What would you like to add to your mentoring relationship and sessions (either with this mentor or with another mentor) that has not happened yet?
What are your reasons for wishing to continue or discontinue the mentoring sessions?

Assess the mentor's performance in the following areas with a numerical rating (1 = disappointing, 5 = outstanding) and, where applicable, a comment:

Personal care Comment:	1	2	3	4	5
Asking good questions Comment:	1	2	3	4	5
Listening and perception Comment:	1	2	3	4	5
Use of prayer and Bible Comment:	1	2	3	4	5
Flexibility and patience Comment:	1	2	3	4	5
Help to identify options Comment:	1	2	3	4	5
Relevant encouragement Comment:	1	2	3	4	5
Appropriate challenge Comment:	1	2	3	4	5
Organisation and reliability Comment:	1	2	3	4	5
Spiritual integrity Comment:	1	2	3	4	5