



Idaho STAR Mentor Review Form

Date _____

Site _____

Mentor _____

Apprentice/Intern _____

PLEASE RATE YOUR MENTOR ON A SCALE OF 1 – 4, WITH 1 BEING “POOR” AND 4 BEING “EXCELLENT.”

_____ How well did your Mentor communicate with you on the range?

_____ How helpful was your Mentor in giving you confidence?

_____ How well did having this Mentor help you succeed in delivering the course?

_____ How encouraging to you was your Mentor?

_____ Was your contribution and opinion respected by your Mentor?

_____ How consistent was the information your Mentor gave you to what you learned during IP?

_____ Did your Mentor do well enough giving you success, consistency of information, and motivation that you would want to be paired with them again?

Comments: _____
