Name: License #: Date:

TEMPLATE

ABOUT YOU

1. How did you find out about the Program?
2. What made you want to sign-up for the Program?
3. How long have you been practicing (in any jurisdiction)?

[ ]  0-5 years

[ ]  6-10 years

[ ]  11-15 years

[ ]  16-20 years

[ ]  21-30 years

[ ]  31+ years, please specify

1. Have you participated in another mentorship program as a mentor before?

[ ]  Yes

[ ]  No

1. How did this experience compare?

[ ]  Better

[ ]  Same

[ ]  Worse

Comments:

ABOUT THE PROGRAM

1. Was the orientation helpful in beginning your mentoring relationship?

[ ]  Yes

[ ]  No

1. What can this Program do to help to make your match more successful?
2. How would you describe the quality of your experience as a participant in the program?
3. Were the mentor program coordinators accessible, easy to talk to and seek advice from when necessary?

[ ]  Yes

[ ]  No

ABOUT THE MATCH

1. How would you describe your relationship with your mentor?

TEMPLATE

1. Did you gain personally from this relationship?

[ ]  Yes

[ ]  No

1. Do you feel your mentor was adequately prepared to be one?

[ ]  Yes

[ ]  No

1. How did you meet?

[ ]  Video Conferencing (Skype etc.)

[ ]  In-person

[ ]  Email

[ ]  Phone

[ ]  Other, please specify

1. Did you follow the original Mentoring Agreement? If not, please explain why.

[ ]  Yes

[ ]  No

1. How often did you meet?

[ ]  Once a month

[ ]  Every two months

[ ]  Every two weeks

[ ]  When necessary

[ ]  Other, please specify

1. Are/were there any factors that made it difficult to participate?

[ ]  Yes

[ ]  No

* 1. If so what are/were those factors?
	2. How did you overcome those factors?
1. Did you plan on maintaining a relationship with your mentor?

[ ]  Yes

[ ]  No

1. Is there anything else you would like to share?