PIBC MENTORING PROGRAM

MENTOR / PROTÉGÉ EVALUATION FORM

To help PIBC maintain and improve the Mentoring Program we request that you complete and return the following program evaluation form. Once completed, please mail it to the PIBC office at: #110-355 Burrard Street, Vancouver, BC, V6C 2G8 or fax it to (604) 696-5032.

This evaluation is being completed by the: [ ] Mentor [ ] Protégé

Name (Optional): __________________________________________________

Time involved in the Mentoring Program: _______ years, and _______ months.

PROGRAM OBJECTIVES

Please check the appropriate answer for each question.

1. In your experience, did the program enhance the process for career development?
   [ ] Yes [ ] No

2. Do you feel the program assists in developing career coaching skills for the mentors who participate in the program?
   [ ] Yes [ ] No

3. Did the program provide (sufficient) career strategy advice to protégés?
   [ ] Yes [ ] No

4. Did the program provide you with an opportunity to broaden your knowledge and contacts, and did it expose you to different facets of government and private practice?
   [ ] Yes [ ] No
GOALS AND EXPECTATIONS

5. What expectations did you have of the program?
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_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

6. Have these expectations been met?
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_____________________________________________________________________
_____________________________________________________________________

7. Do you have any concerns about the program?
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
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_____________________________________________________________________

COMMITMENT

8. How much time, on average, per month have you spent with your mentor/protégé? How was it spent?

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

9. Did this commitment suit your needs?

☐ Yes  ☐ No

10. Please give suggestions on how you would like to see the program enhanced. Please add any other comments you may have.

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