

Evaluation

Now that you have completed the AAMN Mentoring Program, we would like to get some feedback from you to help us improve the AAMN mentoring program. Please complete the items listed below that are adapted from your workbook by Dr. Phillip-Jones.

*Note: Your feedback will be confidential. Thank you

Please Check One: ___Mentor ___Mentee

Part I. General Questions about Your Partnership and the Mentoring Program

A. Your Partnership

1. How frequently have you met with your partner? How satisfactory was this?
2. What were two of the most beneficial development activities you did?
3. What new or improved skills, knowledge, or attitudes did the mentee gain as a result of this partnership?
4. What is the most beneficial change you identified in yourself as a result of your mentorship?
5. What type of feedback or other assistance did the mentor provide that seemed to help most?
6. Have you found your partnership challenging? Why or why not?

B. The Mentoring Program

1. What was the main reason you decided to join the program?
2. What were your initial apprehensions about the program?
3. What improvements would you suggest for the mentoring program?
4. Would you recommend the program to others? Why or why not?

Part II. Your Ratings

A. Separate Components

Directions: Please rate the following on a scale of 1-10 (10 = outstanding/ most important) for their usefulness and benefit to the mentoring program.

1. Communication about the program _____
2. Recruitment process _____
3. Kick-off event (if held) _____
4. Mentor/ Mentee training _____
5. Resource materials _____
6. Support provided by coordinator _____
7. Other (specify) _____

B. Overall Experience

Directions: Please rate the mentoring program overall. 1= waste of time, 10= one of the most valuable times of my life.

Your overall rating= _____

Please send your evaluations to the AAMN Task Force using one of the following mechanisms. Again, your responses will be confidential.

Mail: **The American Assembly for Men in Nursing**
Attention: Mentorship Task Force
PO Box 130220
Birmingham, AL 35213

Email: AAMN@AAMN.org

Fax: **205-956-0146**

Again, thank you for your participation and feedback.