

MENTORSHIP PROGRAM ASSESSMENT / FEEDBACK

Privacy Act Statement

Authority: 10 U.S.C. 5013, Secretary of the Navy; 5 U.S.C. 301, Departmental Regulations.

Purpose: To define work setting placement, professional development requirements, mentor, coach, and supervise the performance of individuals who have volunteered to assist in the DON Mentorship.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD pursuant to 5 U.S.C. 552a(b)(3).

Disclosure: Voluntary. However, failure to provide the requested information may result in nonselection for participation in the BUMED mentorship program.

The Command Mentor Team would like your assistance in evaluating our mentoring program. Please complete questions pertaining to your role in the program and return the completed form to any member of the Command Mentor Team.

1. OPTIONAL INFORMATION

1a. Name	1b. Rank <input type="checkbox"/> Officer <input type="checkbox"/> Enlisted	1c. Years in the Navy	1d. Telephone Number
1e. BUMED Code	1f. Highest Education Level Completed		

2. MENTOR ASSESSMENT / FEEDBACK (Completed by Mentor)

1 = Disagree Strongly 2 = Disagree 3 = Neither Agree or Disagree 4 = Agree 5 = Agree Strongly

	2a. My Protégé and I had an understanding of our mentoring relationship.
	2b. Our mentoring goals were clear.
	2c. My Protégé was motivated to assume his/her responsibilities.
	2d. My Protégé raised issues for discussion.
	2e. A Mentor and Protégé Agreement was completed.
	2f. Our meetings were purposeful and timely.
	2g. Mentoring was a rewarding experience.
	2h. I was able to meet the expectations of my Protégé.
	2i. There was a sense of continuing progress/development.
	2j. There was a positive change in my Protégé.
	2k. My Protégé gave honest feedback.
	2l. My mentoring directly affected my Protégés' advancement or retention.
	2m. I had adequate time for mentoring.
	2n. Resources were available when needed.
	2o. Mentoring training was beneficial.
	2p. The chain of command supported my participation in the mentoring process.

3. MENTOR COMMENTS

4. PROTÉGÉ ASSESSMENT / FEEDBACK (Completed by Protégé)

1 = Disagree Strongly 2 = Disagree 3 = Neither Agree or Disagree 4 = Agree 5 = Agree Strongly

- 4a. I attended a mentoring orientation provided by a Mentorship Program Committee member.
- 4b. My mentor and I had an understanding of our mentoring relationship.
- 4c. Our mentoring goals were clear.
- 4d. My mentor was available when I needed him/her.
- 4e. A Mentor and Protégé contract was completed.
- 4f. Our meetings were purposeful and timely.
- 4g. Having a mentor was a rewarding experience.
- 4h. My expectations regarding the mentor program were fulfilled.
- 4i. There was a sense of continuing progress, development.
- 4j. My mentor gave honest feedback.
- 4k. Mentoring directly affected my advancement and retention.
- 4l. I had adequate time to meet with my mentor.
- 4m. Resources/training were available when needed.
- 4n. Protégé training was beneficial.
- 4o. My chain of command supported my participation in the mentoring program.
- 4p. I have experienced greater job satisfaction as a result of mentoring.
- 4q. I would recommend mentoring to anyone I meet.
- 4r. Interactions were conducted in a confidential manner.

5. PROTÉGÉ COMMENTS ON ANY ADVICE, ASSIGNMENT, TRAINING, SUGGESTED BY YOUR MENTOR YOU FOUND BENEFICIAL OR HELPFUL: