

online version of this form can be found at www.marshfieldschools.org/currentmentors and completed under the 'Current Job Shadow Mentors' heading instead of returning this paper form



Pathway Partners Mentoring Program
JOB SHADOW MENTOR EVALUATION



Thank you for your willingness to host a student for a job shadow experience.
 We are very interested in the success of our job shadow program and appreciate your feedback.

HOST NAME: _____
 TITLE: _____
 COMPANY: _____
 ADDRESS: _____

HOST TELEPHONE# _____
 E-Mail Address: _____
 Student Name: _____
 Date of Job Shadow: _____

Using the following scale of 1 – 4 please rate the student in the following areas:

4-Exceeds Expectations
2-Below Expectations

3-Meets Expectations
1-Needs Improvement

1. Punctuality: ~Reported to Job Shadow at appropriate time.	4	3	2	1
2. Professional Appearance: ~Dressed appropriately	4	3	2	1
~Groomed appropriately	4	3	2	1
3. Professional Conduct: ~Behaved in a professional manner at the work site	4	3	2	1
~Willing to conform to rules & regulations	4	3	2	1
4. Communications: ~Related well to host and others	4	3	2	1
~Asked appropriate questions	4	3	2	1
5. Overall Evaluation: ~Student seemed to benefit from the experience	4	3	2	1
~Student demonstrated genuine interest	4	3	2	1
~How would you rate your experience?	4	3	2	1

6. Would you be willing to host another student in the future?

7. Comments: Please feel free to offer any additional comments on the back of this form.

8. Please return to:

Ginger Sternweis
 Marshfield High School
 1401 E. Becker Road
 Marshfield, WI 54449
 PHONE: 715-387-8464 ext. 4335
sternweisg@marshfieldschools.org

9. Or complete the online version of this form found at www.marshfieldschools.org/currentmentors under the 'Current Job Shadow Mentors' heading.