

ADMINISTRATOR MENTORSHIP / EVALUATION FORM

Required for applicants in the MS Alternate Path to Quality School Leadership Program

To be completed by the administrator applicant:

Name _____		
<i>Last</i>	<i>First</i>	<i>Middle/Maiden</i>
Educator ID # _____	Administrative Position _____	
School District _____	School Term _____	
Superintendent _____		
Applicant's Signature _____		
Note: <i>A copy of this form should be placed in the applicant's personnel folder.</i>		

To be completed by administrative mentor:

I have served as a mentor for the administrator applicant named above during the current school term.

Mentor's Signature : _____

Print Name: _____ **Date:** _____

To be completed by principal where applicant serves in an administrative position:

I have provided a mentorship program for the administrator applicant named above. The evaluation of the applicant's performance is **satisfactory** **unsatisfactory** (check one)

Principal's Signature: _____

Print Name: _____ **Date:** _____

Note: *The principal shall conduct one or more evaluations of the applicant's performance, using the same evaluation tools applied to the evaluation of all administrators. The principal shall then indicate if the applicant's performance is satisfactory or unsatisfactory.*