



2009-2010
**Director Mentor Contract
Self-Evaluation**

Please mail or fax directly to: California Early Childhood Mentor Program,
50 Phelan Avenue, S-10, San Francisco, CA 94112
Fax: 415-452-5604 Phone: 415-452-5600

PROTÉGÉ NAME	PROTÉGÉ PERMANENT ADDRESS
PROTÉGÉ HOME PHONE	PROTÉGÉ EMAIL ADDRESS
DIRECTOR MENTOR NAME	HOW MANY WEEK/MONTHS DID IT TAKE TO COMPLETE THE 20-HOUR CONTRACT? _____months _____weeks

Please type or print clearly. Attach additional pages as needed.

1. What were your objectives or goals for this placement? ^
Goal 1
Goal 2
Goal 3 ♠
2. How did you and your Protégé work to achieve these goals? For example, did you visit your Protégé's site, suggest resources, or help her/him reflect on options? What actions did your Protégé take as a result?
Goal 1
Goal 2
Goal 3 ♠
3. To what degree did your Protégé accomplish her/his objectives/goals for this placement? What were the key factors involved in reaching <u>or not reaching</u> these goals?
Goal 1 _____% Key Factors:
Goal 2 _____% Key Factors:
Goal 3 ♠ _____% Key Factors:

Over

^ The number of goals in any contract differs. Please do not feel required to set or be limited to three goals.

Please type or print clearly. Attach additional pages as needed.

4. Please describe changes in your Protégé's attitudes or behavior (for example, toward colleagues or staff members), if any, that you witnessed as a result of her/his placement with you. If you did not see any changes, what do you see as the Protégé's barriers to change? What do you think would help the protégé conquer those barriers?

5. Please describe any changes in your protégé's energy and enthusiasm for his/her job, if any, as a result of his/her placement with you. Do you perceive your mentoring as a factor in those changes? Please give specific examples of your strategy and the resulting change.

6. What changes, if any, do you notice in your own attitudes, behavior, or job performance as a result of this placement?

DATE

SIGNATURE

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