Assessment Form for Mentees^{9,59} (Complete after first six months of mentoring relationship)

Please Key:		the respingly ag		nat best des 2-Agre			ng toward the of 4-Disagree	
I believe that I have a good mentoring relationship with my mentor. 1 2 3 4 5								
I am benefiting from our mentoring relationship. 1 2 3 4 5								
I am having regular and ample contact with my mentor either through personal meetings or via e-mail.								
1	2	3	4	5				
My mentor and I are congruent on our goals for my professional development. 1 2 3 4 5								
My me	entor re 2	spects r 3	ne as a 4	person. 5				
My me 1	entor ar 2	nd I shai 3	re simila 4	ar values. 5				
My mentor is generous with encouragement. 1 2 3 4 5								
My me	entor ha 2	s involv 3	ved me 4	in committe 5	es/ac	ctivities withi	n the medical	school.
My me	entor is 2	involvin 3	g me in 4	professiona 5	al act	ivities outsid	de the medical	school.
When applicable, my mentor is involving me in research opportunities. 1 2 3 4 5								
•		genero 3			ork I d	do for her/hi	m.	
My mentor understands that I have a life outside the medical school and has helped me integral responsibilities.								
1 2 3 4 5 The best aspects of our mentoring relationship are:								

I would suggest the following improvements/modifications: