



Co-Leading Workshops Mentor-in-Training Evaluation

Date and Location of Workshop: _____

Name of Accredited Mentor/Trainer: _____

Name of Mentor-in-training: _____

Type of Workshop: _____

1. Approximately what percentage of the workshop did the mentor-in-training lead independently?

2. What topic areas did the mentor-in-training lead on each day of training?

3. What are the mentor-in-trainings strengths?

4. What are areas/goals for further training/leading?

5. In your opinion, is this mentor-in-training ready to lead a solo workshop?