

Beginning Teacher and Mentor Match Survey

In late October, beginning teachers complete this survey and **return it to the Director of Curriculum and Academic Achievement**. This information is confidential, and will only be shared with permission of the beginning teacher.

Date: _____

Your mentor is not expected to be able to provide support for everything by the time you complete this survey.

1. Please circle the rating that best represents the support you have received from your mentor in the area of content knowledge and lesson design.

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

2. Please circle the rating that best represents the support you have received from your mentor in the area of classroom management.

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

3. Please circle the rating that best represents the support you have received from your mentor for your professional growth (e.g., grade-level meetings, PLCs, professional reading).

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

4. Please rate (circle) the degree of match between you and your mentor.

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

5. Please indicate your name only if there is a need for a confidential conference on your mentoring relationship.

Name: _____ Date: _____

