

## Mentoring Assessment

Mentor Name: \_\_\_\_\_

Mentee name: \_\_\_\_\_

1. Is he/she going to class?
  - a. Attending classes on time
  - b. Sitting on front row (or center)
  - c. Being an active participant in class
  - d. Be alert and focused throughout the lecture
  - e. Ask questions during class
  - f. Take accurate notes
2. Is he/she visiting the professor?
  - a. Meet with professor during office hours or outside classroom once per week
  - b. Review questions/concepts on chapter and class notes, homework, returned exams, and future exams
3. Does he/she utilize campus resources?
  - a. Financial assistance
  - b. Academic assistance (advising, tutoring, library, etc.)
  - c. Career assistance
  - d. TLSAMP office
  - e. Counseling
  - f. Support group
  - g. Legal advise
  - h. Health services
4. Is he/she familiar with community resources to help with certain situations?
  - a. Religious affairs
  - b. Financial assistance
  - c. Personal Professionals (doctors, barbers/cosmetologist, daycare, etc.)
  - d. Political affairs
  - e. Legal assistance
5. Is he/she engaged in campus activities?
  - a. Student Government
  - b. Sports events
  - c. Recreational
  - d. Scholastic organizations
  - e. Cultural events
  - f. Performing arts
  - g. Other