

Paramedic Clinical Assessment Program

Mentor Evaluation

In an effort to ensure that the paramedic mentors maintain a high level of skill, performance and interest, this evaluation form will be given to the provisional paramedic at the end of the assessment program. It is to the mentor's benefit to know the impression he/she is making on those being trained. It is the belief of the Department that a mentor, who is truly interested in doing his/her best, would welcome this type of feedback. With this in mind, the provisional paramedic is requested to honestly appraise and evaluate their mentor in the areas listed below. All feedback given to the mentor will be verbal and the identity of the provisional paramedic will be kept confidential.

Mentor: _____

Date: _____

Please rate your mentor in the following areas: (Use additional sheet if necessary)

1. Did the mentor set a positive example as a role model?

Poor Fair Average Above Average Excellent

2. Interested in sharing material and information to you?

Poor Fair Average Above Average Excellent

3. Knowledge of training material covered?

Poor Fair Average Above Average Excellent

4. Skill as an instructor, teacher, and trainer?

Poor Fair Average Above Average Excellent

5. Ability to speak effectively?

Poor Fair Average Above Average Excellent

6. Willingness to listen responsively?

Poor Fair Average Above Average Excellent

7. Rated your performance with honesty, fairness, and objectivity?

Poor Fair Average Above Average Excellent

8. Mentor's attitude toward the PCAP program?

Poor Fair Average Above Average Excellent

9. Ability to identify and resolve training needs/problems?

Poor Fair Average Above Average Excellent

10. List the area(s) which you think your mentor is most effective:

11. List the area(s) in which you think your mentor is least effective:

12. Additional comments/suggestions on the mentor (be specific):

Thank you for your comments.