

## APPENDIX D

### LINCATS K12 Mentorship Profile Questionnaire *(completed by mentee)*

Your name: \_\_\_\_\_ Mentor's name: \_\_\_\_\_

#### **Part I: Description of Relationship**

1. What was the *role* of your mentor? (e.g., teacher, counselor, advisor, sponsor, advocate, resource)
2. How often did you *communicate*? (e.g., e-mail, in person, telephone)
3. *How long* have you had this relationship?
4. How would you characterize the *strengths* and *weaknesses* of your relationship?

#### **Part II: Outcome Measures**

**Directions:** Please check all of the following that resulted from your interaction with your mentor and specify or describe below. Supporting documents may be attached, as appropriate.

1.  Publication:
  2.  Presentation or poster:
  3.  New teaching method or strategy:
  4.  Clinical expertise:
  5.  Conducting research:
  6.  Service activities (e.g., community service, political activity, professional organization):
  7.  Development of a program (e.g., educational/clinical course or new program of study):
  8.  Job change/promotion:
  9.  Grant writing/submission:
  10.  Other:
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