

Senior Project Mentor Report

Student Name _____

Project Title / Topic Content _____

As a mentor, we are asking you to verify your senior's efforts on his/her Senior Project. Because all of the time spent on the project has been out-of-class, verification of the student's effort is necessary. Please answer the following questions to help us evaluate your student's project.

1. Can you verify that he/she has satisfactorily **completed** the project? If you cannot, please DO NOT sign this form until you confident the project is completed.

Yes _____ No _____

Can you verify that he/she has spent the minimum 25 hours (35 job shadow) (67.5 paid) creating/participating in this project?

Yes _____ No _____

If not, how many hours has the student spent according to your records and discussions with the student?

2. Have you seen this project at different stages of completion, not just the final phase? (Not applicable for Job Shadow)

Yes _____ No _____

If the answer is NO, please explain:

Your student should have been in contact with you throughout the course of this project. Did you have **at least two** meetings in person with the student over the course of the project?

Yes _____ No _____

If you answered NO, please explain.

3. Please evaluate how this student has seemingly extended his/her learning beyond previous experience and knowledge by way of doing this project.

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4. What problems did the student encounter and overcome in doing the project?

5. What successes have you seen this student achieve as a result of the project?

6. Was the student's project part of a paid work experience or Eagle Scout project?

Yes _____ No _____

Note: If you have questions about your student's work, please contact the Career Choices instructor as soon as possible at 509-332-1551. Thank you for your commitment. We appreciate your time and service.

Mentor's Name (Printed) _____

Mentor's Signature _____

Phone _____

Date _____

REMINDER: DO NOT SIGN THIS FORM IF THE PROJECT IS NOT COMPLETE.