HILLGROVE HIGH SCHOOL SENIOR PROJECT EVALUATION

***COMPLETED FORMS MUST BE MAILED OR FAXED TO:***  Dr. Connie Nelson 4165 Luther Ward Road , Powder Springs, GA 30127

E-mailed or hand-delivered forms will not be accepted FAX: 678-331-8128

**On a 1-25 numerical scale, indicate level of student performance in the following categories by circling the most appropriate number.**

STUDENT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MENTOR NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ENGLISH TEACHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL MUMBER OF MENTORSHIP HOURS\_\_\_\_\_\_\_\_\_\_ COMMENTS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INITIATIVE/ENERGY/ATTITUDE •**Demonstrated initiative **•**Asked appropriate questions **•**Exhibited enthusiasm **•**Accepted constructive criticism

NOT EVIDENT ACCEPTABLE EXCEEDED EXPECTATIONS

**1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25**

**COMMITMENT/DEPENDABILITY •**Demonstrated reliability **•**Kept all commitments **•**Showed dedication to success of project

NOT EVIDENT ACCEPTABLE EXCEEDED EXPECTATIONS

**1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25**

**PROBLEM SOLVING/ CREATIVITY •**Demonstrated ability to overcome setbacks **•**Sought alternate solutions to problems **•**Looked for ways to improve

NOT EVIDENT ACCEPTABLE EXCEEDED EXPECTATIONS

**1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25**

**TIMELINESS/ORGANIZATION •**Punctual **•**Met deadlines **•**Managed time and tasks effectively

NOT EVIDENT ACCEPTABLE EXCEEDED EXPECTATIONS

**1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25**

**PLEASE ADD UP THE TOTAL POINTS \_\_\_\_\_\_\_\_\_\_\_\_\_/100 POINTS**

**WRITTEN EVALUATION OF STUDENT MENTORSHIP** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**MENTOR SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**