



Mentor Protégé Program Progress Report Survey

Date: _____

As fulfillment of your agreement to participate in the Mentor Protégé Program, please complete and return the following report survey.

Mentor Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Protégé Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Agreement Date: _____

Expiration Date: _____

Participation in the Mentor-Protégé program is voluntary. Participation in the program is neither a guarantee for a contract opportunity nor promise of business. The program's intent is to foster positive long-term business relationships.

Please make your appropriate response to the following questions.

1. Developmental Area

Strongly Disagree

Strongly Agree

1 2 3 4 5

Business Management	<input type="checkbox"/>				
Personnel Management	<input type="checkbox"/>				
Quality Assurance	<input type="checkbox"/>				
Construction Management	<input type="checkbox"/>				

2. It was a worthwhile use of my time

3. Arrangements for visits were acceptable (travel, meeting)

4. Mentor/Protégé encouraged professional growth

5. Mentor/Protégé available for consultations, observations, demonstrations

6. Communication was acceptable

7. The experience of having a mentor to help you work on projects was worthwhile with my partner.

8. My Mentor/Protégé experience has been a valuable addition to my business.

9. Contacts between my mentor and me took place (Check all that apply):

- Formally
- Informally
- Face to face
- By phone or conference call
- Email
- Mail
- Once a week
- Twice a month
- Less than twice a month

Any additional comments are appreciated: