

## MENTORING COACH SURVEY

Thank you for taking the time to participate in the Coach Mentoring Program Evaluation. Your comments will enable us to better plan and execute further mentoring opportunities within our LSC and to tailor them to our specific LSC needs. Please fill this out and return to the sender.

Was your mentee on time and prepared for your visit?

- Yes
- Not Sure
- No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was your mentee

- Intimidated or uncomfortable
- Engaged
- "Just there"
- Not sure
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did you encourage a follow up visit?

- Not necessary/Not interested in follow up with the mentee
- Left the door open
- Yes

What do you feel were the most impactful moments of your mentee's visit?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate your overall satisfaction with this program.

- Set-Up Process
  - Satisfied
  - Neutral
  - Dissatisfied
- Interaction with Mentee During Visit
  - Satisfied
  - Neutral
  - Dissatisfied
- Reimbursement Policy
  - Satisfied
  - Neutral
  - Dissatisfied

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you be interested in working with other North Carolina Swimming Mentee Coaches?

- Yes
- Not really

Please provide any additional comments about our program that may help us improve it and offer the best learning experiences possible for our coaches.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_