

Sandy Spring Friends School Senior Project Final Evaluation Form

This form should be completed by the mentor and returned to The Senior Project Committee, Sandy Spring Friends School (see end of form for contact information.)

Student: _____

Sponsor: _____

Organization: _____

1. Briefly describe the student's independent project activity and responsibilities.

2. Please comment on the student's competence in understanding and following instructions.

3. Please comment on the student's attitude in fulfilling the agreed upon responsibilities.

4. Was the student prompt in arriving daily? (circle) Yes No

5. Did the student attend the agreed upon number of days and hours? Yes No

6. Please rate the student's overall performance in fulfilling the independent project requirements. (circle)

Excellent

Satisfactory

Poor

7. What was beneficial to you about the experience? What did you enjoy or dislike about being a mentor?

8. On the basis of your experience this year, would you be willing to accept another intern from Sandy Spring Friends School in the future? (circle) Yes No

(over)

If you answered “yes,” may we have permission to use your name, address, phone number, and email address for a database that would be available to student when they are planning their internships and projects next year? This database would be created and used inside the school and would not be used for mailing purposes.

- I grant permission for Sandy Spring Friends School to list my name, address, phone number and email address for use in a database available to students.
- Please DO NOT use my information in the database.
- I would like to receive informational mailings from Sandy Spring Friends School.

Thank you for assisting a Sandy Spring Friends School student with an independent project. Please return this completed form by June 4, 2008 to:

Senior Project Committee
Sandy Spring Friends School
16923 Norwood Road
Sandy Spring, MD 20860
301-774-7455 ext. 109 phone
301-924-1115 fax
SrProject@ssfs.org