**Beginning Teacher and Mentor**

**Match Survey**

In September, beginning teachers complete this survey and return to the PLCSS Committee Chair. This information is confidential, and will only be shared with permission of beginning teacher.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please circle the rating that best represents the support you have received from your mentor in the area of content area. [Standards 1, 2, 4, 5, 8]

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

2. Please circle the rating that best represents the support you have received from your mentor in the area of classroom management. [Standards 3, 5, 6, 7]

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

3. Please circle the rating that best represents the support you have received from your mentor for your professional growth. [Standards 9, 10]

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

-25-

4. Please rate (circle) the degree of match between you and your mentor.

[Standards 9, 10]

1 (low) 2 3 4 5 (high)

Please briefly explain your response:

5. **Please indicate your name only if there is a need for a confidential**

**conference** on your mentoring relationship.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

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