

Appendix D

The Department of Leadership and Teacher Education
Instructional Leadership Program
Mentor/Principal Survey

You were chosen by your superintendent to mentor a future administrator. Thank you for accepting that responsibility. Your opinions about the residency's strengths and areas needing improvement will be most helpful to program faculty as we continue to design leadership experiences that will give our Residents authentic leadership opportunities. Please take a few moments to complete this *brief* survey; return it to (faculty member). Your responses will be anonymous. Again, thank you.

Mark the space that most nearly reflects your opinion

- 1= unacceptable, needs immediate improvement
2= acceptable, but needs improvement
3= area of strength, some improvement needed
4= area of strength, no improvement needed

<u>Statement</u>	1	2	3	4
1. My orientation session to the program was helpful. I left the meeting at USA with a reasonably clear idea of my responsibility as a mentor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Program requirements (knowledge and ability statements) were clear.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I met with my Resident often enough to evaluate his/her performance while he/she was assigned to my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I was satisfied with the frequency of visits to my school by the USA program supervisor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The Leadership Practices Inventory (LPI) seems to be a helpful formative assessment of Resident performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. My assessment of the Residency program?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please offer suggestions for improvement in the space provided.

Evaluative term and year _____ Signature _____
(optional)