



## Mentor Evaluation

Name:

Date:

Name of farm receiving mentorship:

Period of Mentorship:

1) Were the identified needs of the farm you were working with addressed through the mentorship:

Not at all    Somewhat    Mostly    Completely

a) What needs were not addressed and why:

2) Did you find the mentorship was valuable to the farm you were working with:

Not at all    Somewhat    Mostly    Completely

3) What were the most valuable parts of the mentorship:

4) What would you have liked to change about the mentorship:

5) How was the administration of the mentorship program:

Poor    Okay    Great

6) Would you recommend farmer to farmer mentorship to another farmer:

Not at all    Possibly    Definitely



Written and designed by staff at the Northeast Organic Farming Association of Vermont. This product was developed with support from U.S. Department of Agriculture's Agricultural Marketing Service, National Organic Program



## Mentor Evaluation

7) Additional Comments:



Written and designed by staff at the Northeast Organic Farming Association of Vermont. This product was developed with support from U.S. Department of Agriculture's Agricultural Marketing Service, National Organic Program