



RECOMMENDATION FOR MENTOR PROGRAM



This form must be completed & printed by an Administrator. Please return to Julie Gross at the Administration Building.

APPLICANT NAME

CURRENT SCHOOL

Please rate the above applicant using the following scale:

E =Excellent G=Good F=Fair

Instruction

- Implements effective instructional strategies
- Demonstrates knowledge of LCPS curriculum and Virginia SOL's
- Demonstrates knowledge of appropriate planning and pacing
- Integrates technology into instruction
- Participates in professional collaborative relationships
- Provides differentiated instruction

Communication

- Possesses written communication skills
- Possesses verbal communication skills
- Possesses listening skills
- Establishes a positive relationship with colleagues
- Establishes a positive relationship with administrative staff
- Establishes a positive relationship with parents and community

Classroom Management

- Utilizes effective behavior management strategies
- Uses time wisely
- Is organized and well prepared
- Creates a positive learning environment
- Develops positive and appropriate relationships with students

Other

- Demonstrates Instructional Leadership
- Takes initiative in performance of duties
- Shares ideas willingly

Would you recommend this applicant as a mentor for new teachers?

Yes No With reservation

Additional comments:

Signature: _____

Date: _____

Position: _____

School: _____