## **ADMINISTRATOR MENTORSHIP / EVALUATION FORM**

(Required for applicants in the Mississippi Alternate Path to Quality School Leadership Program.)

NameLast	First	Middle/Maiden
Social Security #	Position	
School District	School Term	
Superintendent	Principal	
Mentor		
Applicant's Signature		
Applicant's Signature	ncluded in the licensure application p	
Applicant's Signature Note: The <u>original</u> of this form should be i	ncluded in the licensure application p	packet. A copy of the form
	ncluded in the licensure application p nel folder.	packet. A copy of the form
Applicant's Signature Note: The <u>original</u> of this form should be i should be placed in the applicant's person	ncluded in the licensure application p nel folder.	packet. A copy of the form

To be completed by principal where applicant serves in an administrative position:

I have provided a mentorship program for the administrator applicant named above. The evaluation of the applicant's performance is \_\_\_\_\_satisfactory \_\_\_\_\_unsatisfactory (check one).

Principal's Signature: \_\_\_\_\_\_

**Note:** The principal shall conduct one or more evaluations of the applicant's performance, using the same evaluation tools applied to the evaluation of all teachers. The principal shall then indicate if the applicant's performance is satisfactory or unsatisfactory.

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

*PLEASE NOTE:* This form with original signatures is to be returned to applicant for inclusion in the licensure application packet. A <u>copy</u> of the form is to be included in the applicant's personnel folder.