

# Tourism Business Mentorship Program

## FINAL PROGRAM EVALUATION FORM

MENTEE

Mentee Name:

Mentor Name:

Date:

**1. How has your overall experience with the Tourism Business Mentoring Program been?**

**2. Do you feel the resources and assistance provided by ITI were adequate for your role as a mentee?**

**3. Have you and your mentor been able to build a comfortable working relationship?**

**4. Were you able to learn from your mentor's experience and background?**

**5. Did your Action Plan Worksheet help you achieve your goals? Why or why not?**

**6. Please share additional comments here.**

