**GRANGEVILLE HIGH SCHOOL**

**SENIOR PROJECT MENTOR REPORTS**

**(To be included in Project Portfolio)**

Student Name

Mentor Phone Number

Thank you very much for the time and effort you are contributing to our student and his/her Senior Project. We very much appreciate your time and energy.

 **10 Hour Final**

Have you seen the student’s Project Log Yes/No Yes/No

Did the student meet with you to discuss their proposed project

and plan? Yes/No Yes/No

Did the student show up **on time** for scheduled appointments? Yes/No Yes/No

Did the student **miss** any scheduled appointments? Yes/No Yes/No

Was the student willing and able to work without constant supervision? Yes/No Yes/No

Did the student have distractions when they were expected to be

working? (cell phone, visiting, off task) Yes/No Yes/No

Do you have concerns about the student meeting the 25 hour Yes/No Yes/No

requirement.

Was the student able to solve problems that arose? Yes/No Yes/No

Did the student expand their knowledge or skills while working on

the project? Yes/No Yes/No

Did the service provided by the student benefit your organization? Yes/No Yes/No

Do you feel the student accomplished his/her goals? Yes/No Yes/No

Did you witness any problems or concerns? Please explain: Yes/No Yes/No

Would you be willing to mentor students again in the future with

this project or similar projects? Yes/No Yes/No

Mentor Signature Date