**Mentor Exit Survey**

Thank you for serving as a mentor in the\_\_\_\_\_\_\_\_\_(program name). Your efforts are greatly appreciated. We are always looking for ways to improve our program and appreciate your feedback. Please complete the following and return in the enclosed envelope.

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

Name of Mentee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of Match: \_\_\_years \_\_\_\_months

Check what best describes your relationship with your mentee. Then please explain your answers below:

🞎 Very close 🞎 Close 🞎 Not very close

🞎 Very successful 🞎 Successful 🞎 Not very successful

Why is your match ending?

Do you feel like you made a difference in your mentee’s life? 🞎 Yes 🞎 No

Please explain below:

Did you feel you received adequate support and supervision from program staff?

What aspects of the \_\_\_Mentoring Program did you like the best?

What aspects of the \_\_\_ Mentoring Program did you like the least?

What could we have done to make our program a better experience for you and/or your mentee?

Would you like to be re-matched? 🞎 Yes 🞎 No

Please provide any additional comments:

**Mentee Exit Survey**

Thank you for being a mentee in the\_\_\_\_ Mentoring Program. We hope you enjoyed being a mentee. We are always looking for ways to improve our program and appreciate your feedback. Please complete the following and return in the enclosed envelope.

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

Name of Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of Match: \_\_\_years \_\_\_\_months

Check what best describes your relationship with your mentor. Then please explain your answers below:

🞎 Very close 🞎 Close 🞎 Not very close

🞎 Very successful 🞎 Successful 🞎 Not very successful

Why is your match ending?

Do you feel like your mentor made a difference in your life? 🞎 Yes 🞎 No

Please explain below:

Did you feel you received adequate support and supervision from program staff?

What aspects of the \_\_\_\_ Mentoring Program did you like the best?

What aspects of the \_\_\_\_\_\_ Mentoring Program did you like the least?

What could we have done to make our program a better experience for you?

Would you like to be re-matched? 🞎 Yes 🞎 No

Please provide any additional comments:

**Parent/Guardian Exit Survey**

Thank you for letting your child participate in the \_\_\_\_\_\_\_Mentoring Program. We hope your child benefited from having a mentor. We are always looking for ways to improve our program and appreciate your feedback. Please complete the following and return in the enclosed envelope.

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

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of Match: \_\_\_years \_\_\_\_months

How would you describe your child’s relationship with his/her mentor? Please explain your answers below:

🞎 Very close 🞎 Close 🞎 Not very close

🞎 Very successful 🞎 Successful 🞎 Not very successful

Why did the match end?

Do you feel like your child’s mentor made a difference in his/her life? 🞎 Yes 🞎 No

Please explain below:

Did you feel you received adequate support and supervision from program staff?

What aspects of the \_\_\_\_\_\_ Mentoring Program did you like the best?

What aspects of the \_\_\_\_\_\_\_\_ Mentoring Program did you like the least?

What could we have done to make our program a better experience for you?

Would you allow your child to be re-matched? 🞎 Yes 🞎 No

Please provide any additional comments:

**Closure Letter**

Mentoring Program

Address

*(Name of Mentor, Mentee, or Parent/Guardian)*

*(Address)*

Dear (*first name*),

This letter is to inform you that the mentoring relationship managed by the \_\_Mentoring Program has officially ended as of *(match end date).*

*(Optional if applicable)* We have made attempts to contact you via phone and e-mail to no avail and regret that we are unable to meet with you and go through a formal closure process.

As the match has formally ended, *program name* no longer assumes responsibility for monitoring and supervising the match and your file will be placed on an inactive status. Thus, any future contact between match partners is at the sole discretion of all parties involved (mentor, mentee, and parent/guardian). Any incidents occurring due to future contact among match participants is beyond the scope and responsibility of *program name*

Thank you for your involvement in our program. We appreciated your participation.

Please feel free to contact me if you have any questions.

Sincerely,

 

For further guidance on implementing these resources, contact Virginia Mentoring Partnership. **Virginia Mentoring Partnership** is a statewide 501c3 anchor organization committed to supporting the quality, sustainability, and capacity of mentoring programs. Services available to programs include training, technical assistance consulting, and quality assurance.

As an affiliate Mentoring Partnership of MENTOR: The National Mentoring Partnership (MENTOR), Virginia Mentoring Partnership is proud to be a technical assistance provider for [The National Mentoring Resource Center (NMRC)](http://www.nationalmentoringresourcecenter.org/), a project of The Office of Juvenile Justice and Delinquency Prevention and MENTOR. This youth mentoring resource is **no-cost for programs** and aims to strengthen mentoring quality and effectiveness. Through this free consulting time, VMP can provide guidance and resources for program staff on topics of their choice, ranging from basic program design to establishing a recruitment plan to developing outcome measurements. Connect with our Program Services staff today at www.vamentoring.org, betsy@vamentoring.org.