

*Scholarly Activity Oversight Committee*

**Mentor Evaluation of Fellow - Input Report Month & Year**

**Name of Mentor:**

**Name of Fellow:**

**Today's Date:**

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1. The fellow has clear direction with his/her research.

YES     NO

Comments:

2. The fellow meets regularly with me in a timely manner.

YES     NO

Comments:

3. The fellow meets prearranged timeline expectations for his/her research.

YES     NO

Comments:

4. The fellow is likely to meet fellowship goals and expectations for scholarly activity based on progress and direction of current scholarly activity.

YES (*likely to meet expectations*) Additional Comments encouraged:

NO (*unlikely to meet expectations*) If the answer is "no" please detail why below.

Comments:

5. Do you have any suggestions about ways to improve the PEM fellow scholarly activity mentoring process in general or with this fellow in particular?