



MENTOR REPORT (MBBS)

MERDU, Faculty of Medicine, University Malaya
79675739 (Please return this form to MERDU)

MERDU USE

Date Received:

A. INFORMATION

MENTEE	MENTOR
Name :	<input type="checkbox"/> Professor <input type="checkbox"/> Assoc. Professor <input type="checkbox"/> Dr.
I/C No.:	Name :
Matrix No.:	Gender : <input type="checkbox"/> Female <input type="checkbox"/> Male
Gender : <input type="checkbox"/> Female <input type="checkbox"/> Male	Ethnic : <input type="checkbox"/> M <input type="checkbox"/> C <input type="checkbox"/> I <input type="checkbox"/> Others: _____
Ethnic : <input type="checkbox"/> M <input type="checkbox"/> C <input type="checkbox"/> I <input type="checkbox"/> Others: _____	Department :
Class of : Stage/ Session :	Email :
Email :	Phone no.:
Phone no.:	

B. MENTOR-MENTEE SESSION

Date of Meet:

Time of Meet:

Location:

End Time:

Mentor signature:

Mentee signature :

C. FOR LECTURER ONLY

I. PURPOSE OF MENTOR-MENTEE SESSION

Schedule meet Counselling Academic Discussion Others: _____

II. DISCUSSION ON MENTOR-MENTEE SESSION

Main issues:

Other issues :

Outcome :

Strategies discussed :

III. FEEDBACK FOR THIS SESSION

1. I find my mentee:

Not interested in MBBS Struggling in MBBS Need counselling Doing well Others: _____

2. The time spent with the mentee was (You can tick more than one)

Adequate A waste of time Encouraging Beneficial Others: _____
Please specify

IV. MENTOR-MENTEE PROGRAMME: (You can tick more than one)

In my opinion the Mentor-Mentee programme is:

A waste of time Beneficial to the student Others: _____

V. SUGGESTIONS/COMMENTS: