**FEEDBACK FOR BAAPS MENTEE**

**NAME OF MENTEE:**

**HOST CENTRE:**

Please rate your experience of the Mentorship in the following domains:

**Operating theatre experience:**

 Poor Below Average Average Above Average Excellent

**Out-patient clinic experience:**

Poor Below Average Average Above Average Excellent

**Teaching experience:**

Poor Below Average Average Above Average Excellent

**Involvement with patient journey:**

Poor Below Average Average Above Average Excellent

**Participation in audit & research:**

 Poor Below Average Average Above Average Excellent

Please indicate if indicative aesthetic logbook case numbers were achieved & attach copy of operative logbook covering Mentorship period

Please list below the name of all audit and research projects you have participated in, and their status (presented/published/in press etc.):

Please write a summary of your experience of the Mentorship below:

How likely (out of 10) will you be to recommend this Mentorship to your peers?