FORM 3-Dean's Internship Evaluation

As authorized by the Division of Christian Education Accreditation and Credentials of the Sunday School Publishing Board, National Baptist Convention, USA, Inc. **Submit forms to:** The Division of Christian Education, 330 Charlotte Avenue, Nashville, Tennessee 37201-1188

This form should accompany Form 2.			
Intern's name: (Click on arrow to select title)			
Address:	City	StateZip	
Phone: Daytime ()	E-mail Addres	ss:	
How long have you worked with the intern?			
What CLS did you and the intern complete?		School #	
1. Did the intern demonstrate that he or she v If no, please explain:	was capable of performing the	ne duties of a certified dean? Yes No	
	-	n what area(s) does the intern need more training?	
3. In your estimation, will the intern follow t Publishing Board? Explain.	the procedures as set by forth	by the Christian Education Division of the Sunday School	
Yes No I If no, ple	ease explain.	ready to assume the position of a certified dean?	
5. If the intern is not ready to assume the post a certified dean (please use an additional s		tail what steps the intern should take in order to become	
Please complete evaluation results on the	back of this form.		
Signature: Mentoring Dear	Dean No	o Date//20	
Signature:		Date//20	
Intern			

Evaluation Results (Mentoring Dean please complete this section.) Name of School: Location of School: _____ City ____ State ____ **Evaluation Dates** (1) (2) (3) (4) (5) (6) Activity and Evaluation (1): Activity and Evaluation (2): Activity and Evaluation (3): Activity and Evaluation (4): Activity and Evaluation (5): Activity and Evaluation (6): Comments/Concerns: