FORM 3-Dean's Internship Evaluation Form

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:** Christian Education Division, P.O. Box 70990 Nashville, 37207-0990

This form should accompany Form 2.		
Intern's name (Choose One: Rev., Dr., Dea., M	r., Mrs., Ms., Miss, Min.):	
Address:	City	State Zip
Phone: Daytime()	E-mail Address:	
How long have you worked with the inter	rn?	
What CLS did you and the intern comple	te?	School #
Did the Intern demonstrate that he or sl If not, please explain:	he could perform the duties of a certifie	ed dean? Yes [] No []
2. While working with the Intern during a	a Christian Leadership School, what are	ea(s) does the Intern need more training?
3. In your estimation, will the Intern folloopublishing Board? Explain	ow the procedures as set forth by the Ch	nristian Education Division of the Sunday School
	Intern ready to assume the position of a please explain	certified dean based on your evaluation?
5. If the Intern is not ready to assume the a certified dean. (Please use an addition		at steps the Intern should take in order to become
Please complete evaluation results on t	he back of this form.	
Signature: Mentoring I	Dean No	o Date/20
Signature:		Date/20

$\label{lem:eq:complete} Evaluation\ Results\ (\text{Mentoring Dean, please complete this section.})$

Name of School:			
		City	
Evaluation Dates	(3)/	(2)/	
Activity and Evaluat	ion (2):		
Activity and Evaluat	ion (3):		
Activity and Evaluat	ion (4):		
Activity and Evaluat	ion (5):		
Activity and Evaluat	ion (6):		
Comments/Concerns	s:		