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Maine Media College MFA Program

Registration for Graduate Credits

Candidate ______________________________   Date ________________

Advisor ______________________________

Candidate’s area of concentration (check one):

Photography ____  Film ____  Multimedia ____

Credits required to complete the degree (prior to this registration):

Studio ____   Academic ____

Describe below information regarding proposed projects, residencies, or workshops to be completed this term; please indicate whether the project is for studio or academic credit by including an “(S)” or “(A)” respectively as part of the project title. Be advised that once this form is submitted project titles may not be changed and must also be consistent on all related forms.

1. Project title (attach completed Mentored Project Proposal)

   Number of credits requested ____

   Mentor ______________________________

2. Project title (attach completed Mentored Project Proposal)

   Number of credits requested ____

   Mentor ______________________________
3. Project title (attach completed Mentored Project Proposal)

Number of credits requested ____
Mentor _____________________________

4. Project title (attach completed Mentored Project Proposal)

Number of credits requested ____
Mentor _____________________________

The undersigned acknowledge and agree that the above proposals are to be completed by the Candidate, and evidence of completion is to be presented at a retreat scheduled to be conducted ________________________, 20__

Candidate ___________________________          Date ______________
Advisor _______________________________          Date ______________
MFA Chair _____________________________         Date ______________
MAINE MEDIA COLLEGE

MFA Program Mentored Project Proposal

Candidate:__________________________

Mentor:___________________________

Advisor: ___________________

Dates: ________,__,____ through ________,__,____   # of credits:____

Project Title:________________________________________

This project is for Academic  Studio credit (Circle one)

Please provide the information outlined below. Additional pages may be attached to this form. Be as specific and detailed as possible while allowing sufficient flexibility to adjust as the project proceeds.

Brief Description/Title of Project:

1. Describe the goals and learning objectives of this project and the sources of imagery or research. Be specific with regard to the skills and knowledge you expect to attain.
2. How will you demonstrate that you have achieved these goals and objectives? What criteria will be used to assess and evaluate your project? What kind and how much work do you expect to complete by the end of the project?

3. Describe the reading and writing component of this project. If this is a project for academic credit, please describe your library / research needs and the related resources available to you.

4. Provide the dates you anticipate meeting with your mentor.

5. Additional comments.

Candidate signature_____________________________ Date____________

Mentor signature_______________________________ Date____________

Advisor signature______________________________ Date____________

MFA Chair signature: ___________________________ Date: ____________
Maine Media College
MFA program
Mentor Agreement Form

Mentor: __________________________ Candidate: __________________________

Project dates: ____________________ to ____________________

Project Title: __________________________ Number of credits: ________

Both Mentor and MFA Candidate are held to the policies and duties as described in the MFA, Candidate and Faculty Handbooks.

The fee for this contract will be one half of the tuition paid for the project. The Mentor fee per credit on current projects is $237.50/credit. The fee will be paid in two installments, one upon receipt of the Mentor’s Mid-Term Evaluation, and the balance upon receipt of the Mentor’s Final Evaluation of the project.

Mentors are considered and paid as Independent Contractors and as such are not covered under the Maine Photographic Workshops / Maine Media College worker’s compensation or liability policies.

Either party may cancel this agreement upon written notice, with four weeks notice to both the Candidate and MFA Administrator. This agreement is automatically canceled upon the termination of the Candidate’s enrollment or active status in the program.

The signature confirms agreement to fulfill the Mentor responsibilities as described in the MFA Handbook.

Full Name: __________________________

Address: ____________________________

Studio Phone: __________________________ Home Phone: __________________________

Fax: __________________________ Email: __________________________

Are you authorized to work in the U.S. on an unrestricted basis: YES NO

If YES, please provide your Social Security #: __ __ __ - __ __ - __ __ __

Mentor Signature: __________________________ Date: ____________

MFA Administrator: __________________________ Date: ____________

MFA Chair: __________________________ Date: ____________

Please complete, sign and return the original of this agreement with the Mentor Payment Form and signed Project Proposals.

Send to: Maine Media College, MFA Program, 70 Camden Street, Rockport, ME 04856
Maine Media College MFA Program

Mentor Payment Form

Candidate__________________________________________

Project Title__________________________________________ Project Start Date______________________

Number of credits__________ Project End Date_____________________

Mentor__________________________________________

Mentor Signature__________________________________________ □ Mentor Agreement

MFA Chair Signature__________________________________________

This portion for Administrative use only

Mid Project

__________ Candidate Mid project Evaluation

__________ Mentor Mid Project Evaluation

__________ Mentor Payment Requested MFA Program Administration __________

__________ Mentor Payment Issued Financial Dept. Signature______________

__________ Amount Due

Final Project

__________ Candidate Final Project Evaluation

__________ Mentor Final Project Evaluation

__________ Mentor Payment Requested MFA Program Administration __________

__________ Mentor Payment Issued Financial Dept. Signature______________

__________ Amount Due
Maine Media College MFA Program

Workshop Proposal

Candidate: ___________________________________

Workshop Instructor: ____________________________

Dates of Workshop & Location: ___________________

Brief description of Project to be done as part of the Workshops:

Candidate: ____________________________ Date: __________

MFA Advisor: ____________________________ Date: __________

MFA Chair: ____________________________ Date: __________
Maine Media College MFA Program
Residency Request

Candidate:__________________________
Mentor:___________________________
Advisor: ___________________ 
Dates: ________,__,____ through ________,__,____ # of credits:____

Project Title:________________________________________________
This project is for Academic Studio credit (Circle one)

Please provide the information outlined below. Additional pages may be attached to this form.

Brief Description/Title of Residency:

1. Describe the goals and learning objectives of this residency and the sources of imagery or research. Be specific with regard to the skills and knowledge you expect to attain.

2. How will you demonstrate that you have achieved these goals and objectives? What criteria will be used to assess and evaluate your residency? What kind and how much work do you expect to complete by the end of the residency?

3. Additional comments.

Candidate signature_____________________________ Date_____________
Mentor signature_____________________________ Date_____________
Advisor signature_____________________________ Date_____________
MFA Chair signature: ___________________________ Date: ______________
Project Support List

Candidate ____________________________

Project: ____________________________  # of Credits: __________

Please provide a list of things you will need to complete your project. Tell us what you need whether it is space, equipment, crew, etc. Be very specific about your needs. Include a list film/video, photographic, or digital equipment the school can provide. Please use the Equipment Check-Out sheet when requesting any equipment.

Dates Requested:  from _________________ to _________________

Which Department do you need support from? _______________________________

Candidate signature_______________________  Date_____________

Department Mgr signature_______________________  Date_____________

Advisor signature_____________________________  Date_____________

MFA Chair______________________________  Date______

Support List
Maine Media College MFA
Project Add/Drop/Change

Note: If a Candidate elects to discontinue a project for which they have registered, this will be treated as a project change. The project mentor will be paid any fees owed for services performed to the date of discontinuation. The Candidate will be invoiced separately for these fees.

Candidate:

Date:

Project Title:

Project Mentor:

Advisor:

Briefly describe the nature of the change to the above-named project and the reasons for this change:

Have you discussed this change with your advisor?

Have you discussed this change with the project mentor?

Candidate’s signature: ______________________________

Advisor’s signature: ______________________________

MFA Chair signature: ______________________________

Registrar’s notes: ______________________________

Amount due to project mentor:
Maine Media College MFA Program

Retreat Evaluation

1. What aspects of the retreat were most helpful or interesting?

2. What were least helpful or interesting?

3. Were the presentations interesting and useful? Feel free to critique each individually.

4. Were the group critiques helpful and why?

5. Were the private meetings helpful and why?

6. Were the readings and discussion worthwhile?

7. What was missing that would have been helpful?
8. Did you receive answers to your questions and concerns?

9. Did you have adequate information prior to the retreat? If not, what would have helped to prepare you?

10. Please describe your overall reaction to the retreat including the quality of the faculty, staff and activities.

11. What suggestions do you have for future retreats?

12. Other comments, concerns or suggestions. (Use back of form if desired)
Maine Media College MFA Program

Program Evaluation

1. What aspects of the MFA program are most interesting or useful to you?

2. What aspects are least helpful or interesting?

3. What is working for you as an MFA Candidate?

4. What is NOT working for you?

5. Do you receive answers to your questions and concerns? If not, what are your outstanding questions?
6. Please describe your overall reaction to the program.

7. What suggestions do you have for improving the program?

8. Other comments, concerns or suggestions. (Feel free to use the reverse side).
Maine Media College MFA Program

Mentor Mid-Project Evaluation

Candidate Name_________________  Date_____________

Mentor Name__________________

Project Title_________________________

1. Have the Candidate's goals changed since the initial Project Proposal? If so, have you approved the changes?

2. Has the scope or type of work changed substantially. If so, do you approve?

3. Are you satisfied with the Candidate's progress so far? If not, have you discussed a plan to address the concerns?

4. What do you consider to be the strengths of the Candidate's work to date?

5. What do you consider to be the weaknesses?
6. Are you satisfied with the Candidate's level of commitment to the Project?

7. How many times have you met with the Candidate to date?

8. Do you anticipate the Candidate fulfilling the goals and work outlined in the project proposal within the specified timeline? If not, when do you expect the work to be complete?

9. Do you have any other concerns about the Candidate's work or anything we should know related to the Candidate's progress toward the MFA?

This form should be sent to the Program Administrator.

Mentor signature______________________ Date_______

Advisor signature ______________________ Date_______
Maine Media College MFA Program
Mentor Final Project Evaluation

Candidate Name_______________________ Date___________

Mentor Name_______________________

Project Title________________________

Please address the following questions in your evaluation of the Candidate's work on this Project.

1. Did the Candidate accomplish the goals and requirements of the Project?

2. Are you satisfied with the scope and quality of the Candidate's work?

3. What do you consider to be the strengths of the Candidate's work?

4. What do you consider to be the weaknesses and what recommendations do you have for improvement in these areas?

5. Are you satisfied with the Candidate's level of commitment to the Project?
6. Do you have any concerns about the Candidate's work or anything we should know related to the Candidate's progress toward the MFA?

This form should be sent to the Program Administrator.

Mentor signature_______________________ Date_______

Advisor signature _____________________ Date ______
Maine Media College MFA Program

Candidate Mid-Project Evaluation

Candidate Name_________________ Date___________

Mentor Name___________________

Advisor Name__________________

Project Title___________________

1. Have your goals changed since the initial Project Proposal. If so, how?

2. Has the scope or type of work changed substantially. If so, how?

3. Are you and your mentor satisfied with your progress so far? If not, how do you plan to address the concerns?

4. What do you consider to be the strengths of your work to date?

5. What do you considered to be the weaknesses?
6. Are you satisfied with the dialogue and work with your mentor. If not, have you discussed this with your advisor or the MFA Chair?

7. How many times have you met with your mentor to date?

8. Do you anticipate fulfilling the goals and work outlined in your project proposal within the specified timeline? If not, when do you expect to complete?

9. Do you have any questions, concerns or need for additional assistance at this point?

Copies of this form should be sent to the Project Mentor and the Program Administrator

Candidate signature: ________________________________ Date: _________

Advisor signature: ________________________________ Date: _________
Maine Media College MFA Program
Candidate Final Project Evaluation

Candidate Name__________________ Date____________

Mentor Name___________________

Project Title____________________________

Please address the following questions in your evaluation of the work on this Project.

Did you accomplish the goals and requirements of the Project?

Are you satisfied with the scope and quality of your work?

What do you consider to be the strengths of this particular work?

What do you consider to be the weaknesses of this particular work?

Are you satisfied with your level of commitment to the Project?

Are you satisfied with the dialogue and work with your mentor?
Do you have any questions, concerns or need for additional assistance that have come about by working on this project?

Copies of this form should be sent to the Program Administrator

Candidate signature______________________ Date_____________

Advisor signature: _____________________ Date: ____________
Maine Media College MFA Program
Mentor Residency Evaluation

Candidate Name_______________________ Date___________

Mentor Name_______________________

Residency Title________________________

Please address the following questions in your evaluation of the Candidate's work during this residency.

1. Did the Candidate accomplish the goals and requirements of the residency?

2. Are you satisfied with the scope and quality of the Candidate's work?

3. What do you consider to be the strengths of the Candidate's work?

4. What do you consider to be the weaknesses and what recommendations do you have for improvement in these areas?

5. Are you satisfied with the Candidate's level of commitment during the residency?

This form should be sent to the Program Administrator.

Mentor signature______________________ Date_______

Advisor signature _____________________             Date _______

Date ________
Maine Media College MFA Program
Candidate Residency Evaluation

Candidate Name__________________ Date___________
Mentor Name___________________
Residency Title____________________________

Please address the following questions in your evaluation of this residency.
Did you accomplish the goals and requirements of the residency?

Are you satisfied with the scope and quality of your work?

What do you consider to be the strengths of this particular work?

What do you consider to be the weaknesses of this particular work?

Are you satisfied with your level of commitment to the residency?

Are you satisfied with the dialogue and work with your mentor?

Copies of this form should be sent to the Program Administrator

Candidate signature______________________ Date_____________

Advisor signature: ____________________ Date: ____________
Maine Media College
Advisor Evaluation

To be completed by the candidate.

Candidate: ______________________
Advisor: ______________________
Date: ________________

1. Are you generally satisfied with your advisor?

2. Has your advisor been helpful to you in constructing a plan for completing the MFA degree requirements?

3. Has you advisor been helpful to you in pursuing your individual goals and objectives?

4. What do you consider the advisor’s strengths?

5. What do you consider to be the advisor’s weaknesses?

Do not write below this line

Readers’ notes:
Maine Media College MFA
Candidate Evaluation of Project Mentor

Candidate ___________________________ Mentor _____________________________

Date _____________  Project Title ___________________________________________

Please address the following questions pertaining to your mentor:

1. Why did you choose to work with this mentor?

2. Was the mentor accessible and responsive?

3. What do you believe are the mentor’s strengths?

4. What do you believe are the mentor’s weaknesses?

5. Overall, was the mentor helpful to you in realizing your goals for this project?

6. Would you recommend this mentor to one of your peers? Why, or why not?