

Freshmen Mentor Application

PERSONAL INFORMATION			Date:	
Name:	Grade:	Shop:		ID Number:
Home Number:		Cell Number:		E-Mail:

Extracurricular Activities (List Them Below)	

What is/are your major goal(s)? (Write it/them below)

Are you able to manage your time wisely?	Circle Yes / No
Why or Why not?	
Do you adjust to change easily?	Circle Yes / No
Why or Why not?	
Are you receptive to feedback?	Circle Yes / No
Why or Why not?	

INTEREST
Why would you like to be involved in this program?

Will you be participating in Co-op?	Circle Yes / No
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