



Leaders In Training Sports Mentoring Program * C/o the Urban Affairs Coalition * 6th Floor * 1207 Chestnut Street
 Philadelphia, PA 19107 * Phone: 267.377.3471 * Fax: 215.851.0514
 * Email: eugene.pough@litsports.org * Website: www.litsports.org

Youth Interest Survey

Directions: This survey will help our program learn more about you and your interests and help us find a good match for you. Be sure to complete the entire survey and turn it in to your Counselor or the West Oak Lane Library.

Can you commit to meet with your mentor on Tuesday evenings (and potentially Saturday mornings)? Please check all that apply.

Tuesday Nights, Yes/No: ____ Saturday Mornings, Yes/No: ____

What careers are you interested in?

What is one goal you have set for the future?

If you could learn something new, what would it be?

Do you speak any languages other than English? If so, which languages?

If you had a whole day to do whatever you wanted what would you do?

Circle ALL the words that best describe you:

Quiet	Talkative	Shy	Friendly	Funny	Serious
Adventurous	Helpful	Moody	Happy	Sad	Active
Lonely	Outgoing	Popular	Cautious	Loud	Hopeful

What is your favorite...

Music group? _____

Food? _____

Famous person? _____

Movie? _____

Book or story? _____

Video or computer game? _____

School subject? _____

Place to hang out? _____

Physical activity? _____

Time of year? _____



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List two things you hate to do:

1. _____
2. _____

List at least two things you feel like you do well:

1. _____
2. _____

What qualities do you value in an adult?

Are there any other issues of importance to you that you would like to share with your mentor?

Why are you interested in participating in this program?

What do you hope to get out of your mentoring relationship?
