

**Reality Mentor Incorporated**  
*Creating New Directions For Today's Youth*

**Mentor Interest Survey**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete all the following. This survey will help RMI know more about you and your interests and help us find a good match for you.

What are the most convenient times for you to meet with your mentee? Please check all that apply.

Weekdays: \_\_\_ Lunchtime: \_\_\_ After school: \_\_\_ Evenings: \_\_\_

Please indicate age group(s) and/or you are interested in working with:

Age: 14–18 \_\_\_\_\_

What are you looking for in a Mentee?

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

What are some favorite things you like to do with other people?

What are your favorite subjects to read about?

What is your job and how did you choose this field?

What is one goal you have set for the future?

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

What person do you most admire and why?

Describe your ideal Saturday.

Please check all activities you are interested in:

<input type="checkbox"/>	Biking	<input type="checkbox"/>	Camping	<input type="checkbox"/>	Science	<input type="checkbox"/>	Cooking	<input type="checkbox"/>	Library
<input type="checkbox"/>	Hiking	<input type="checkbox"/>	Boating	<input type="checkbox"/>	Music	<input type="checkbox"/>	Sports	<input type="checkbox"/>	Yoga
<input type="checkbox"/>	Golf	<input type="checkbox"/>	Swimming	<input type="checkbox"/>	Gardening	<input type="checkbox"/>	Parks	<input type="checkbox"/>	Movies
<input type="checkbox"/>	Fishing	<input type="checkbox"/>	Animals	<input type="checkbox"/>	Eating	<input type="checkbox"/>	Board Games	<input type="checkbox"/>	Shopping

List any other areas of strong interest: