

MEN WITH DIVINE PURPOSE, INC

Mentee Intake and Assessment Application (CONFIDENTIAL)

Student Name: _____ DOB: _____ Cell Phone: _____

Address: _____ City: Houston State: TX Zip: _____

Parent/Guardian: _____ Occupation: _____

Email: _____ Phone: _____

Emergency Contact: _____ Relationship: _____

Address: _____ Home/Cell Phone: _____

Academic Profile (Circle One)

Math	Below Average	Average	Above Average
Reading	Below Average	Average	Above Average
Writing	Below Average	Average	Above Average

Comments: _____

Has your child failed a grade? _____ What are your child's strongest subjects? _____

What are your child's weakest subjects? _____

What does your child want to be when he grows up? _____

Hobbies/Sports/Activities (Check ALL that apply)

- | | | |
|-------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Football | <input type="checkbox"/> Fishing | <input type="checkbox"/> Reading |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Music | <input type="checkbox"/> Movies |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Golf | <input type="checkbox"/> Acting |
| <input type="checkbox"/> Soccer | <input type="checkbox"/> Boating | <input type="checkbox"/> Singing |
| <input type="checkbox"/> Track | <input type="checkbox"/> Swimming | <input type="checkbox"/> Video Games |
| <input type="checkbox"/> Hockey | <input type="checkbox"/> Bowling | <input type="checkbox"/> Dominoes |
| <input type="checkbox"/> Skating | <input type="checkbox"/> Board Games | <input type="checkbox"/> Computer |

Social Profile (Check ALL that apply)

- | | | |
|--|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sexually Active | <input type="checkbox"/> Follower | <input type="checkbox"/> Sensitive |
| <input type="checkbox"/> Anger | <input type="checkbox"/> Leader | <input type="checkbox"/> Lazy |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Friendly | <input type="checkbox"/> Responsible |
| <input type="checkbox"/> Fearful | <input type="checkbox"/> Sore Loser | <input type="checkbox"/> Liar |

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Rebellious | <input type="checkbox"/> Loner | <input type="checkbox"/> Thief |
| <input type="checkbox"/> Moodiness | <input type="checkbox"/> Talkative | <input type="checkbox"/> Creative |
| <input type="checkbox"/> Confrontational | <input type="checkbox"/> Quiet | <input type="checkbox"/> Loving |
| <input type="checkbox"/> Unorganized | <input type="checkbox"/> Shy | <input type="checkbox"/> Honest |
| <input type="checkbox"/> Low Self-esteem | <input type="checkbox"/> Active | <input type="checkbox"/> Works hard |
| <input type="checkbox"/> High Self-esteem | <input type="checkbox"/> Perfectionist | <input type="checkbox"/> Dependable |
| <input type="checkbox"/> Humorous | <input type="checkbox"/> Neat | <input type="checkbox"/> Hospitable |
| <input type="checkbox"/> Forgiving | <input type="checkbox"/> Encourager | <input type="checkbox"/> Teachable |
| <input type="checkbox"/> Disciplined | <input type="checkbox"/> Appreciative | <input type="checkbox"/> Stubborn |
| <input type="checkbox"/> Serious | <input type="checkbox"/> Disrespectful | <input type="checkbox"/> Courteous |
| <input type="checkbox"/> Compassionate | <input type="checkbox"/> Self-Control | <input type="checkbox"/> Patient |
| <input type="checkbox"/> Emotional | <input type="checkbox"/> Persistent | <input type="checkbox"/> Helpful |
| <input type="checkbox"/> Generous | <input type="checkbox"/> Cautious | <input type="checkbox"/> Bossy/ Bully |

Please Answer

Are there any male influences or role models in your son's life (coach, teacher, relatives, etc.)?

Are there any topics or issues you do not want mentors to discuss with your son (girls, sex, religion, etc.)? _____

Are you willing to sacrifice and support the program in matters pertaining to your child (time, resources, or skills)? _____

Are you a member of a local church? (Yes/No)

Name of church? _____ Denomination? _____

Men with Divine Purpose or various other media may choose to take pictures or videotape participants in MWDP's school-based mentoring activities. These images may be used for MWDP's displays, brochures, newsletters, archives, news releases, publicity and Web sites.

I hereby grant permission to MWDP to take and reproduce photographs and videotapes for publication, including publication by news sources and other sources for all educational, trade, advertising and other purposes as determined by MWDP. (Initial) _____

Mentee Print Name

Signature

Date

Parent/Guardian Name

Signature

Date

MWDP Staff/Administration

Signature

Date