



TELEPHONE (516)833-7275
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The Sledge Group Inc. Mentee Profile Sheet

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____

Male/Female: _____ Ethnicity: _____

Date of Birth: _____ Age: _____

School: _____ Grade: _____

Mother's name /legal Guardian: _____

Parent/Guardian phone: _____ work _____

Father's name /legal guardian _____

Parent/Legal Guardian's tel.# _____ work _____

Emergency contact: _____

Emergency phone: _____

Do you work? _____ Yes _____ no

Do you have any children? _____ Yes _____ no If yes how many? _____ Age of child _____

Total number of people living in your household (including yourself) _____

What language is spoken at home? _____ English _____ Spanish _____ French _____ other

Do you have any health problems? (Asthma, allergies, recent hospitalization)

If yes please explain: _____

Do you take any medications? _____ Yes _____ no If yes explain: _____

Are you currently on Probation? _____Yes _____no

If yes please provide name of Probation Officer _____

Phone # _____

Hobbies/Interests:

Career interests:

Academic Profile:

Subjects needing help in (circle all that apply):

Reading	Science	Math	Social Studies	Physical Education
ESL	Foreign Language	Composition	Other: _____	

Grade Point Average/Recent test scores: _____

Other academic issues (attendance, discipline problems, etc.): _____

How did you hear about this program? _____

What do you hope to accomplish by participating in this program? _____

Application must be signed by a Parent of Legal Guardian.

Mentee Signature

date

Parent/Legal Guardian Signature

date