

STUDENT INTEREST SURVEY

NAME: AGE:	
- MY favourite THINGS: -	- Hobbies & INTERESTS: - SPORTS, CLUBS OR OTHER ORGANISATIONS I'M INVOLVED IN:
DRINK: COLOR:	
MOVIE: TV SHOW: EVENTS:	HOBBIES, INTERESTS OR ACTIVITIES I ENJOY OUTSIDE OF SCHOOL:
SONGS:	

FAVORITE SUBJECT: LEAST FAVORITE SUBJECT: I FEEL CONFIDENT WITH: I STRUGGLE WITH: OTHER THINGS MY TEACHERS NEED TO KNOW:

