



Student Interest Inventory



Name: _____

Today's Date: _____ Birth Date: _____

Brothers and Sisters:

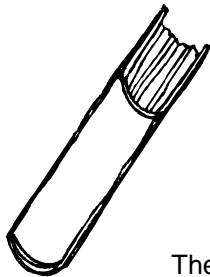
Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____



Special friends: _____

What I like to do most at home: _____

These are my favorite hobbies: _____

These are my favorites:

Book: _____ TV show: _____

Movie: _____ Food: _____

Singer: _____ Song: _____

If I had one wish, it would be: _____

School would be better if: _____

If I had a million dollars, I would: _____

This is what my teacher did last year that I liked the most: _____

This is what my teacher did last year that I liked the least: _____