



513FREE  
c/o Tandem  
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### Mentee Referral Form

Youth name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_

Requested by: \_\_\_\_\_

Position: \_\_\_\_\_ Phone Number: \_\_\_\_\_

On a scale of 1–10 (10 being highest) rate the student’s level of:

	Truancy		Behavioral Issues		Drug/Alcohol Abuse		Vocational Training
	Self-Esteem		Study Habits		Social Skills		Peer Relationships
	Family Support		Special Needs		Attitude		Other, specify:

Why do you feel this youth might benefit from a mentor?

What particular interests, either in school or out, do you know of that the child has?

What strategies/learning models might be effective for a mentor working with this youth?

With what specific academic subjects, if any, does the student need assistance?

**Additional comments not addressed in this form:**