

SOLVIT ACADEMY STUDENT QUESTIONNAIRE

The following questions are to be answered by you, the student applicant. For applicants under the age of 8, your parents may be your scribe if you are not able to write. For all applicants 8 years of age and older, we want to hear from you, in your own handwriting, without input from anyone else. Feel free to use additional paper if necessary. Your parents will then upload this form as part of the application process. Thanks for helping us get to know you a little better!

Today's date: _____

Your name: _____

What do you like to be called? _____

What do you like to do during your free time when you are inside?

What do you like to do during your free time when you are outside?

What books or stories do you love? Why?

What is the hardest part of being a good friend?

What do you like to learn about? How do you like to learn?

If you had \$500 to spend on our learning environment, what would you want to buy? Why?

What do you like best about yourself?

What would you like to change about yourself?