



BOYS & GIRLS CLUB
OF MERIDEN
GREAT FUTURES START **HERE.**

**Boys and Girls Club of Meriden
Mentor Program
Referral Form**

Date: _____

Youth's Name: _____

Age: _____ Grade: _____

School: _____

Requested by: _____

Position: _____ Phone Number: _____

The child is being referred for assistance in the following areas (check all that apply):

Academic Issues Behavioral Issues Delinquency Vocational Training

Self-Esteem Study Habits Social Skills Peer Relationships

Family Issues 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?



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

- _____ Academic performance
- _____ Social skills
- _____ Self-esteem
- _____ Family support
- _____ Communication skills
- _____ Attitude about school/education
- _____ Peer relations

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

Additional comments: