MU Exploratory Program
Student Inventory Profile

NAME: _____   M#_____

HOME ADDRESS:_____   DATE OF BIRTH:_____

_____   CELL PHONE #: _____

LOCAL ADDRESS:_____   EMAIL:_____

_____

EDUCATIONAL PLANS

MAJOR: _____   INTENDED MAJOR: _____

CAREER ASPIRATIONS: _____

EXTRA CURRICULAR INVOLVEMENT/PLANS:

_____

I WOULD LIKE INFORMATION ON CAMPUS OPPORTUNITIES IN THE FOLLOWING AREAS:

_____

EMPLOYMENT

ARE YOU CURRENTLY WORKING? YES or NO   IF SO, WHERE: _____

WHAT DAYS/HOURS DO YOU TYPICALLY WORK: _____

TOTAL HRS/WEEK: _____ Will your job work around your school schedule? YES or NO

PERSONAL INTERESTS

OUTSIDE INTERESTS: _____

CURRENT STRESSORS: _____

Is there anything else that may have an impact on your academic success

(i.e. personal, family, social, medical)? _____

_____

(OVER)

NAME: _____

REQUESTS FOR ADDITIONAL INFORMATION

(Circle a number, higher the number the more information/understanding you want on the topic.)

Understand Gen. Ed. 1 2 3 4 5	Club/Organizations 1 2 3 4 5	Mentor/Mentoring 1 2 3 4 5
Explore Majors/Car. 1 2 3 4 5	**Tutoring Services** 1 2 3 4 5	Personal Counseling 1 2 3 4 5
Financial Aid Info. 1 2 3 4 5	Community Service 1 2 3 4 5	Job Opportunities 1 2 3 4 5

In order to make our time as productive as possible, please <u>rate the following statements on a scale from 1 to 5(with 5 as the highest)</u> indicating your interest or need for information on the topic.

<u>ACADEMIC SUCCESS INTERESTS</u>

_____ **How to get organized**   _____ **How to manage my time**

_____ **How to use a study strategy**   _____ **How to talk with professors**

_____ **How to handle test anxiety**   _____ **How to handle stress**

_____ **How to get or stay motivated**   _____ **How to stop procrastinating**

_____ **How to increase my academic**   _____ **How to find academic resources**
        confidence

OTHER:_____

_____

Student Signature: _____ Date:_____