



MENTEE QUESTIONNAIRE (Start of Mentoring Programme)

Name of the Institution: _____

Academic Year: _____

Department: _____

Date: _____

Section A: Personal Information

1. Name of the Mentee: _____
2. Enrolment/Roll Number: _____
3. Class/Semester: _____
4. Age: _____
5. Contact Number: _____
6. Email ID: _____
7. Name of the Assigned Mentor (if known): _____

Section B: Academic Background

8. How would you describe your academic performance?
☐ Excellent
☐ Good
☐ Average
☐ Needs Improvement
9. Which subjects do you find most interesting?
10. Which subjects or topics do you find difficult?
11. Do you face any difficulties in understanding lectures or completing assignments?
☐ Yes
☐ No
☐ Sometimes



12. If yes, briefly describe the difficulties.

13. How regularly do you attend classes?

- ☐ Always
- ☐ Usually
- ☐ Sometimes
- ☐ Rarely

Section C: Personal Development and Interests

14. What are your main strengths?

15. Which areas would you like to improve?

- ☐ Communication skills
- ☐ Time management
- ☐ Confidence
- ☐ Academic performance
- ☐ Leadership skills
- ☐ Decision-making
- ☐ Other: _____

16. What are your hobbies and interests?

17. Do you participate in extracurricular activities?

- ☐ Yes
- ☐ No
- ☐ Occasionally

18. How comfortable are you speaking in front of a group?

- ☐ Very comfortable
- ☐ Comfortable



☐ Somewhat uncomfortable

☐ Very uncomfortable

Section D: Goals and Career Aspirations

19. What are your short-term academic or personal goals?

20. What are your long-term career aspirations?

21. Do you have a clear idea about your future career?

☐ Yes

☐ Somewhat

☐ No

22. What skills or knowledge would you like to develop to achieve your goals?

Section E: Expectations from the Mentoring Programme

23. What do you expect from your mentor?

24. In which areas would you like your mentor's guidance?

☐ Academic guidance

☐ Career planning

☐ Personal development

☐ Communication skills

☐ Stress and time management

☐ Motivation and confidence

☐ Other: _____

25. How often would you prefer to meet your mentor?

☐ Weekly

☐ Fortnightly

☐ Monthly



☐ As required

26. Are you comfortable sharing your academic concerns and challenges with your mentor?

☐ Yes

☐ No

☐ Not sure

27. What would make this mentoring programme helpful and meaningful for you?

Section F: Additional Information

28. Is there any specific challenge or concern you would like your mentor to know about?

29. Is there any additional support you feel you may need during the academic year?

30. Any other suggestions or expectations from the mentoring programme?

Mentee Declaration

I confirm that the information provided above is true to the best of my knowledge. I understand that the purpose of this questionnaire is to help my mentor understand my needs and support my academic and personal development.

Signature of Mentee: _____

Date: _____