ABESIT



ABESIT Mentorship Program

Mentoring to encourage success!!

Student Self-Assessment Form

For 1st year students

(Filled form has to be submitted by the student)

Name

Mobile No.

2	Father's Name					Mobile	No.				
3	Admission / Roll No.	l									
4	Course:		Group:				Mentor :				
5	Semester										
6	Subjects Studying in cu semester (Use Subject abbreviations)										
7	Percentage of class attended in each subject (estimated)										
8	Rate your knowledge at gained in the above Sul scale 1to 5; very poor to good)	ojects (
9	Academic record (in %)		10 th	12 th	Grad	uation	1 st Yr	2 nd Yr	3 rd Yr	4 th Y	r —
	ow much time per week d							ours?			

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12.	Stren	gths	Weaknesses				
13. Hobb	pies	Time spent / week	Hobbies	Time spent / week			
14. How mu	ch time per w	eek do you spend on per	sonal development?				
Activities N		Number of hours/week	Activities	Number of hours/week			
15. Any spe	cial achievem	nent(s)/ skill(s) you have.					
16. Briefly d	escribe yours	elf in (twenty					
		oblem? If yes, please spo					
Non-Acader	nic:						

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18. Areas where you think ac Academic:	dditional help is required.
Non-Academic:	
19. What career do you plan	after this course?
	Declaration by Student:
Ito my knowledge.	hereby declare that the above information provided by me is true
Signature of Student	Date: