

Self-Assessment: Likes & Dislikes Inventory

NAME _____

Please finish each thought by writing honest answers to each of the thoughts below.

1. I like to _____

2. I worry over _____

3. My feelings are hurt when _____

4. When I read, I _____

5. I hate to _____

6. I am afraid that _____

7. I feel proud when _____

8. I am happy when _____

9. I get angry when _____

10. I love _____

11. I feel ashamed when _____

12. In my free time I like to _____

13. A famous person I would like to meet is _____

14. I would like to go on a vacation to _____

15. My favorite video is _____
16. I am best at _____
17. For a pet, I would like to have a _____
18. If I changed my name it would be _____
19. My favorite TV program is _____
20. What class do you like most? _____
21. What class do you like least? _____
22. What things have you made? _____

Please continue to respond to these with a word that you think of first.

Favorite color	Favorite candy
Worst color	Favorite drink
Favorite animal	Favorite Type of Music
Least favorite animal	Favorite Song
Favorite food	Favorite Season
Worst food	Favorite Day of the Week
Favorite junk food	Favorite sport
Favorite restaurant	Sport you hate
Favorite Ice Cream Flavor	Least favorite day of the week

When finished with the above, hand to your teacher. Teacher will file the inventory in your student file folder, or you may place it there yourself.