

Name \_\_\_\_\_

### **Personal Traits**

Check as many as apply to you. **I am:**

- |  |   |  |                                      |  |
|--|---|--|--------------------------------------|--|
| <input type="checkbox"/> Accurate      | <input type="checkbox"/> active         | <input type="checkbox"/> adaptable     | <input type="checkbox"/> alert       | <input type="checkbox"/> ambitious     |
| <input type="checkbox"/> Assertive     | <input type="checkbox"/> bold           | <input type="checkbox"/> business-like | <input type="checkbox"/> calm        | <input type="checkbox"/> capable       |
| <input type="checkbox"/> Careful       | <input type="checkbox"/> competent      | <input type="checkbox"/> competitive   | <input type="checkbox"/> confident   | <input type="checkbox"/> conscientious |
| <input type="checkbox"/> Considerate   | <input type="checkbox"/> consistent     | <input type="checkbox"/> cooperative   | <input type="checkbox"/> considerate | <input type="checkbox"/> creative      |
| <input type="checkbox"/> Dependable    | <input type="checkbox"/> diligent       | <input type="checkbox"/> effective     | <input type="checkbox"/> energetic   | <input type="checkbox"/> experienced   |
| <input type="checkbox"/> Fair-minded   | <input type="checkbox"/> flexible       | <input type="checkbox"/> friendly      | <input type="checkbox"/> hardworking | <input type="checkbox"/> healthy       |
| <input type="checkbox"/> Helpful       | <input type="checkbox"/> honest         | <input type="checkbox"/> imaginative   | <input type="checkbox"/> independent | <input type="checkbox"/> intelligent   |
| <input type="checkbox"/> Knowledgeable | <input type="checkbox"/> loyal          | <input type="checkbox"/> mature        | <input type="checkbox"/> open-minded | <input type="checkbox"/> organized     |
| <input type="checkbox"/> Outgoing      | <input type="checkbox"/> patient        | <input type="checkbox"/> persistent    | <input type="checkbox"/> practical   | <input type="checkbox"/> precise       |
| <input type="checkbox"/> Punctual      | <input type="checkbox"/> precise        | <input type="checkbox"/> quick         | <input type="checkbox"/> reliable    | <input type="checkbox"/> resourceful   |
| <input type="checkbox"/> Responsible   | <input type="checkbox"/> self-motivated | <input type="checkbox"/> self-reliant  | <input type="checkbox"/> stable      | <input type="checkbox"/> steady        |
| <input type="checkbox"/> Strong        | <input type="checkbox"/> tactful        | <input type="checkbox"/> teachable     | <input type="checkbox"/> thorough    | <input type="checkbox"/> thoughtful    |

List Your Five Strongest Qualities Here

Give Proof (An Example) Of Each Quality Here

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

## SKILLS

Check as many as apply to you. **I can:**

<input type="checkbox"/> listen	<input type="checkbox"/> cooperate	assemble _____
<input type="checkbox"/> read	<input type="checkbox"/> help people	_____
<input type="checkbox"/> speak clearly	<input type="checkbox"/> handle complaints	construct _____
<input type="checkbox"/> write clearly	<input type="checkbox"/> work with a team	_____
<input type="checkbox"/> follow instructions	<input type="checkbox"/> meet the public	inspect _____
<input type="checkbox"/> give instructions	<input type="checkbox"/> follow safety rules	_____
<input type="checkbox"/> train others	<input type="checkbox"/> organize time	maintain _____
<input type="checkbox"/> learn quickly	<input type="checkbox"/> organize tasks	_____
<input type="checkbox"/> accept criticism	<input type="checkbox"/> organize information	repair _____
<input type="checkbox"/> learn from mistakes	<input type="checkbox"/> organize materials	_____
<input type="checkbox"/> take responsibility	<input type="checkbox"/> organize people	install _____
<input type="checkbox"/> understand	<input type="checkbox"/> plan ahead	_____
<input type="checkbox"/> ask questions	<input type="checkbox"/> follow through	operate _____
<input type="checkbox"/> ask for help	<input type="checkbox"/> meet deadlines	_____
<input type="checkbox"/> report information	<input type="checkbox"/> solve problems	drive _____
<input type="checkbox"/> persuade	<input type="checkbox"/> handle money	_____
<input type="checkbox"/> sell	<input type="checkbox"/> calculate	process _____
<input type="checkbox"/> word processing	<input type="checkbox"/> spreadsheet	_____
<input type="checkbox"/> graphics	<input type="checkbox"/> desktop publishing	_____
<input type="checkbox"/> create web pages	<input type="checkbox"/> general computer use	other _____

**Accomplishments:** list awards, honors, certificates you have received

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_