

Summary Sheet

Name _____

- | | | | | | |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Reading | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 2. Writing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 3. Document Use | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 4. Numeracy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 5. Computer Use | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 6. Thinking Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 7. Oral Communication | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 8. Working With Others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |
| 9. Continuous Learning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Poor | Fair | OK | Good | Excellent |

What are some career-specific skills you feel you are very good at performing?

_____	_____
_____	_____
_____	_____

What are some career-specific skills you feel you would like to acquire or improve?

_____	_____
_____	_____