

Frederick Community College – JOB SEARCH SELF-AWARENESS INVENTORY

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

**I. Job Objective**

\_\_\_\_\_

**II. Education Background**

College: \_\_\_\_\_

Location: \_\_\_\_\_

Degree or Certification: \_\_\_\_\_

Major/Program: \_\_\_\_\_

Date received: \_\_\_\_\_

Major Courses (if no degree); \_\_\_\_\_

Other Education: (list military, trade/vocational schools, special training, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III. Employment History: (start with most recent job first)**

Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Duties and/or Accomplishments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Duties and/or Accomplishments:

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Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Duties and/or Accomplishments:

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Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Duties and/or Accomplishments:

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Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Duties and/or Accomplishments:

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IV. **Extracurricular Activities:** (includes committees, clubs, sports, community organizations, hobbies, and indicate any position of leadership you may have held.)

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V. **Awards or Honors:** (these can be personal, school or business related)

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VI. **Skills Inventory:** check off the basic skills and qualities that you have acquired through your educational, employment, or other activities.

<u>Basic Skills</u>		<u>Qualities</u>
<input type="checkbox"/> writing	<input type="checkbox"/> understanding new ideas	<input type="checkbox"/> enthusiasm
<input type="checkbox"/> organizing	<input type="checkbox"/> teaching	<input type="checkbox"/> dependability
<input type="checkbox"/> communicating	<input type="checkbox"/> using tools	<input type="checkbox"/> flexibility
<input type="checkbox"/> convincing others	<input type="checkbox"/> selling	<input type="checkbox"/> creativity
<input type="checkbox"/> working with numbers	<input type="checkbox"/> physical strength	<input type="checkbox"/> leadership
<input type="checkbox"/> imagining	<input type="checkbox"/> budgeting	<input type="checkbox"/> patience
<input type="checkbox"/> supporting others	<input type="checkbox"/> problem solving	<input type="checkbox"/> punctuality
<input type="checkbox"/> analyzing	<input type="checkbox"/> public speaking	<input type="checkbox"/> intelligence
<input type="checkbox"/> handling new situations	<input type="checkbox"/> helping others	<input type="checkbox"/> motivation
<input type="checkbox"/> following instructions	<input type="checkbox"/> planning	<input type="checkbox"/> diligence
<input type="checkbox"/> Managing others		<input type="checkbox"/> efficiency
<input type="checkbox"/> remembering		<input type="checkbox"/> energy
<input type="checkbox"/> manual dexterity		<input type="checkbox"/> preciseness
<input type="checkbox"/> meeting deadlines		<input type="checkbox"/> thoroughness
<input type="checkbox"/> supervising		<input type="checkbox"/> dedication
<input type="checkbox"/> researching		<input type="checkbox"/> honesty <input type="checkbox"/> persistence
<input type="checkbox"/> keeping records		<input type="checkbox"/> sensitivity <input type="checkbox"/> humor

List other specific skills that you may have such as typing, software, or operating a particular piece of machinery:

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VII. In terms of employment, rank the following items 1 – 5.  
Number 1 will be your most qualifying experience and number 5 your least.

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|----------------------------|---|
| ____ Education or Training | _____ Community activities/volunteer work |
| ____ Homemaking activities | _____ Hobbies/interest                    |
| ____ work experience       |   |

VIII. Do you have a scattered or broken work history? \_\_\_\_\_ (if Yes, may want to consider Functional Style resume)

IX. Are you entering the job market for the first time? \_\_\_\_\_ (if Yes, may want to consider Chronological Style resume)

X. References (list 3 individuals who can speak favorably about your skills, accomplishments, or work history):

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_