My Career Situation Survey

Date _____

Name ___________________ DOB _____ Age _____ Birthplace ___________________

Years of Education _________ Education Completed ______________________

Think about your future career that you would like to have:

1. Choosing a career has been difficult for me. True False
2. My present job does not relate to my career of interest. True False
3. I am not sure if I am going to enjoy my career. True False
4. I want to make sure that I am choosing the right career. True False

I would like more information about:

5. How to find employment in my career field of interest? Yes No
6. What personality types enter my chosen career field? Yes No
7. Is there room for growth (employment opportunities)? Yes No
8. What type of training do I need for my career choice? Yes No

Other careers that I have though about are:

________________    _______________    _______________    _______________

Additional Questions/Comments:

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

**If you answered True or Yes to any of the above statements you may be in need of Career Services. You can request a Career Counseling Session at the Cooperative Title V-Teacher Prep Program Transfer/Career Center. (Campus Services Bldg.) Tel: (818) 364-7827