

Organization and Self-Direction: Dependability and Responsibility 1

Instructor: Present this short strengths assessment as the student participates in an employment experience, school-based vocational experience, community service or volunteer activity, extracurricular activity, etc.

Name: _____

Date: _____

	1 NEVER	2 SOMETIMES	3 MOST OF THE TIME	4 ALWAYS
1) Do I arrive at my job (or class, after-school activities) on time?				
2) Do I leave my job either at the scheduled time or later?				
3) Checking in to work and checking out from work may require a certain procedure such as clocking in or out on a time clock or completing a time sheet. Sometimes it may involve telling someone that I am there or that I am leaving. Do I check in when I get to work and check out when I leave?				
4) If I am sick and not able to go to work, do I know who to call and do I call in a timely manner?				
5) If I get injured while working, do I know who to tell?				
6) If I get injured, do I stay calm and report my injury?				
7) Sometimes I may need to take some time off work. Do I know who to go to in order to request time off?				
8) Do I request time off from work with plenty of notice so my supervisor will know ahead of time?				