

NORTH CENTRAL CAREER DEVELOPMENT CENTER

**516 Mission House Lane
New Brighton, MN 55112
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CLIENT QUESTIONNAIRE

The information requested on the following pages is essential to your career evaluation program. Experience has shown that frank responses to the questions will enable the career assessment program to be more helpful. Be assured that full opportunity for discussion and expansion of your answers will be given during the interview with you. If you need additional space for any answer, please attach separate sheets of paper. Typing is not necessary, however the questionnaire in its present form can be easily typed. If available, include a copy of your current dossier and/or résumé along with these materials.



Full Name _____

Address _____
Street City State Zip

Phone # Home _____ Work _____ Email _____

Date of Birth _____ Age _____ Sex _____ Place of Birth _____

Marital Status: Single ___ Engaged ___ Married ___ Date _____ Divorced ___ Date _____

Remarried ___ Date _____ Widowed ___

Children

Names	Ages

Denominational body (Association, Conference, Diocese, District, Presbytery, Synod, etc) _____ Date of Ordination (if applicable) _____

If not ordained, what is the official way your governing church body recognizes your relationship with it?

1. What are your reasons for seeking career development? _____

2. What would you like to accomplish in your consultative time at NCCDC? _____

3. Were you referred to the career center by someone else? ___ If so, who? _____

4. Year finished high school _____ Where _____

5. List all formal education and work history since high school in chronological order. Include Clinical Pastoral Education, if applicable.

Dates	School or Employer	Types of Work	Monthly wage	Major/degree	GPA

6. Describe your present employment situation (include size of town and parish, if applicable).

7. Of the ministerial activities listed below, please choose (in order of importance to you), four in which you are:

- | | |
|--------------------------------------|---------------------------------------|
| Administration | Prophetic witness |
| Community service involvement | Social Consciousness-raising/advocacy |
| Confirmation instruction | Spiritual formation/enrichment |
| Denominational functions/meetings | Support group leadership |
| Evangelism | Teaching of adults |
| Global-missions interpretation | Visitation (hospital/shut-ins) |
| Inter-faith ecumenical participation | Worship leadership |
| Ministry to the aged | Youth work |
| Pastoral care counseling | Preaching |
| other | |

Most Effective

Least Effective

8. Of the ministerial activities listed in which you are least effective, what resources are available to you for help in these areas? _____

What other resources do you need or desire? _____

9. What would you most like to change about your present employment situation? _____

10. Describe your relationship to co-workers, if applicable _____

11. Have you had any occupation counseling previously? _____ Where _____

12. What occupation (s) did your parents encourage you to follow? _____

13. Who were the "key" persons in your decision to enter a church-related occupation? _____

14. What other occupations did you consider? _____

15. Describe your decision to enter a church-related occupation. What was your age, objective, expectations, etc? _____

16. How does your spouse feel about your occupation and your present position (if applicable)?

17. How do your children feel about your occupation and your present position (if applicable)?

18. In what ways will your spouse participate with you in this career counseling program (if applicable)? _____

19. Describe your typical working day in detail _____

20. What are your long-range career goals? _____

21. Indicate the most important issues you wish to discuss during your time at the center. Mark no more than five (5), placing a "1" by the most important, a "2" by the second most important, etc.
- _____ Career exploration for other vocational options
 - _____ Current work difficulties
 - _____ Emotional strain
 - _____ Evaluation of professional competencies and effectiveness
 - _____ Exploration of continuing education options
 - _____ Family relationships
 - _____ Feedback regarding perception of self-image
 - _____ Financial stress
 - _____ Human sexuality (female-male identity, roles, relationships)
 - _____ Marital relationship
 - _____ Personal needs, traits, values, goals, interests
 - _____ Professional goals, needs
 - _____ Reaffirmation of vocational decision
 - _____ Requirement of congregation or judicatory
 - _____ Spiritual enrichment
 - _____ Theological formation-faith exploration
 - _____ Vocational role agreement or conflict
 - _____ Other _____

22. Describe your leadership style and how well it works for you and/or others. _____

23. How do you handle personal crisis situations (family, friendship, employment, financial, etc)?

24. When you encounter conflict with another person (or group), how do you most usually respond?

25. From any time in your life, identify any thoughts, feelings, or experiences that were disturbing or unusual for you. Describe briefly and give your age at that time. _____

26. Are you under any financial stress at this time? If so, please explain _____

27. What kinds, if any, of real estate do you currently own or are you purchasing? _____

28. Is the parsonage, manse, rectory church-owned? _____

29. Are your parents living? Father ____ (date of death) _____ Mother ____ (date of death) _____

30. What occupations do (did) they follow?

Father _____ Mother _____

31. What was the level of their education?

Father _____ Mother _____

32. Did you live with both parents as you were growing up? _____

33. What other adults, if any shared the family home? _____

34. List the names and ages of your brothers and sisters. Indicate your age and placement in the table:

Names	Ages

35. As you think back to childhood days, how do you feel about the way life was then? _____

36. Please describe disciplinary experiences during childhood and adolescence. _____

37. Please describe briefly your relationship with your father during:

Childhood _____

Adolescence _____

Adulthood _____

38. Please describe briefly your relationship with your mother during:

Childhood _____

Adolescence _____

Adulthood _____

39. Financially, how well off would you say your family-of-origin was?

___ well above average ___ a little above average ___ about average

___ a little below average ___ very poor

40. Please describe the friendships that you had during childhood and adolescence. _____

41. Who are your close friends now? Give ages, professions, etc. (names can be omitted), and describe relationship. _____

42. Please describe your childhood and adolescent religious experiences. _____

43. Describe how your present theological position relates to earlier beliefs. If major changes in orientation have occurred, at what age? _____

44. Describe your present relationship to your spouse (if applicable). If single, characterize your relationship with any special friend (s). _____

45. Describe your spouse's education, present/future career plans, and her/his financial income (if applicable). _____

46. Describe your relationship to your children. Indicate names, ages, and sex of children, as well as occupations of grown children (if applicable). _____

47. Which statement best describes your current family/living situation as you now see it?

- Very satisfactory
- Satisfactory
- Neither satisfactory or unsatisfactory
- Unsatisfactory
- Very unsatisfactory

48. What would you like to change within your current family/living situation to increase your satisfaction level? _____

Date Completed _____

