

CAREER ANALYSIS FORM

Name of the Student

Address

.....

Phone No Mobile

Email

Parents Occupation

Qualification of Father

Qualification of Mother

Family Background

.....

School Name & Address

..... Standard

Career Goal

Strengths 1

2

3

4

5

Weaknesses 1

2

3

4

5

Opportunities 1

2

3

4

5

CAREER ANALYSIS FORM

Threats 1.....
2.....
3.....
4.....
5.....

Habits I have and would like to continue

1.....
2.....
3.....
4.....
5.....

Habits I have and would like to discontinue

1.....
2.....
3.....
4.....
5.....

Habits which I don't have and want to have

1.....
2.....
3.....
4.....
5.....

Habits which I don't have and don't want to have

1.....
2.....
3.....
4.....
5.....

What do you feel about yourself?

Would you like to say something more?