

NORTH CENTRAL CAREER DEVELOPMENT CENTER

516 Mission House Lane
New Brighton, Minnesota 55112
Telephone: (651) 636-5120

CLIENT QUESTIONNAIRE

The information requested on the following pages is essential to your career development program. Experience has shown that frank responses to the questions will enable the Center's professional staff 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 use back pages or attach separate sheets of paper. Typing is not necessary although the questionnaire in its present form can be easily typed. Most persons need one or two time modules to complete the questions adequately.

Do not over-schedule your free time during the days you are consulting at the Center. Allow two hours each day or evening for assignments and reflection on the material discussed during the counseling session.

A copy of your current dossier and any other materials, if available, would be helpful for your program. Arrange for your physician to report on a recent (within the past year) physical examination. Medical Form B should be forwarded to the North Central Career Development Center as soon as possible.

Full Name _____

Address _____
Street City State Zip

Telephone: Home _____ Work _____

Date of Birth _____ Age _____ Sex _____

Place of Birth _____

Marital Status: Single _____ Engaged _____

Married _____ Divorced _____ Remarried _____ Widowed _____
Date Date Date Date

Children: (Names and 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. EDUCATIONAL and EMPLOYMENT HISTORY:

Year finished high school _____ Where _____

Please 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 or Degree Earned	GPA
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

5. Describe your present employment situation: (Include size of town and parish, if applicable):

A. Duties and Responsibilities.....

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

A. Most Effective

B. Least Effective

1. _____

1. _____

2. _____

2. _____

3. _____

3. _____

4. _____

4. _____

- 1. Administration
- 2. Community service involvement
- 3. Confirmation instruction
- 4. Denominational functions/meetings
- 5. Evangelism
- 6. Global-missions interpretation
- 7. Inter-faith ecumenical participation
- 8. Ministry to the aged
- 9. Pastoral care-counseling
- 10. Preaching

- 11. Prophetic witness
- 12. Social consciousness-raising/advocacy
- 13. Spiritual formation/enrichment
- 14. Support group leadership
- 15. Teaching of adults
- 16. Visitation (hospital/shut-ins)
- 17. Worship leadership
- 18. Youth work
- 19. Other

C. 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?

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

E. Describe your relationship to co-workers, if applicable.

6. Have you had any occupation counseling previously? _____
Name and Agency _____
7. What occupations(s) did your parents encourage you to follow?
8. Who were the "key" persons in your decision to enter a church-related occupation?
9. What other occupations did you consider?
10. Describe your decision to enter a church-related occupation. What was your age, objective, expectations, etc.?
11. How does your spouse feel about your occupation and your present position?
(If applicable).
 - A. How do your children feel about your occupation and your present position? (if applicable.)

12. In what ways will your spouse participate with you in this career counseling program? (If applicable).
13. Describe your typical working day in detail.
14. What are your long-range career goals?
15. Indicate the most important issues you wish to discuss during your sessions 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 _____
16. Describe your leadership style and how well it works for you and/or others.

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

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

18. 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.

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

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

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

21. Are your parents living? Father _____ Mother _____

Date(s) of death. _____

22. What occupations do (did) they follow?

Father _____

Mother _____

23. What was the level of their education?

Father _____

Mother _____

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

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

26. List the names and ages of your brothers and sisters: Indicate your age and placement in the listing of your brothers and sisters.

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

28. Please describe disciplinary experiences during childhood and adolescence.

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

Childhood:

Adolescence:

Adulthood:

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

Childhood:

Adolescence:

Adulthood:

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

_____ Well above average

_____ A little below average

_____ A little above average

_____ Very poor

_____ About average

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

33. Who are your close friends now? Give ages, professions, etc., not necessarily names, and describe relationship.

34. Please describe your childhood and adolescent religious experiences.

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

36. Describe your present relationship to your spouse (if applicable). If single, characterize your relationship with any special friend(s).
- A. Please describe your spouse's education, present/future career plans, and her/his financial income (if applicable).
37. Please describe your relationship to your children. Indicate names, ages and sex of children, as well as occupations of grown children (if applicable).
38. Which statement best describes your current family/living situation as you now see it?
- ____ Very satisfactory
- ____ Satisfactory
- ____ Neither satisfactory or unsatisfactory
- ____ Unsatisfactory
- ____ Very unsatisfactory
39. What would you like to change within your current family/living situation to increase your satisfaction level?

Date Completed _____