

STUDENT PROFILE/CAREER ADVISEMENT FORM

DATE:

NAME:

AGE:

ADDRESS:

TELEPHONE : MOBILE 876-

PREVIOUS SCHOOL ATTENDED:

WHY/WHEN DID YOU LEAVE:

DISCIPLINARY ISSUES AT PREVIOUS SCHOOL:

FAMILY BACKGROUND: (complete family unit, mother, father, siblings, extended)

PARENTS/SELF EMPLOYMENT HISTORY:

MEDICAL ISSUES:(illness, allergies)

SOCIAL ISSUES:(concerns, needs)

WHAT DO YOU SEE YOURSELF DOING:(next 5 years)

SUBJECTS :(CSEC/CAPE)

LONG TERM CAREER OBJECTIVES:

PERSONALITY TRAITS:(*strengths, weaknesses*)

WHY DO YOU WANT TO DO THIS PROGRAM

INTERVIEWER'S COMMENTS:

CAREER ADVISEMENT/RECOMMENDATION