

Parent Input Form—Employability Skills

Your child will be working on skills to help himself/herself in a job setting. I would like your ideas about what you think your son or daughter does well. I would also like to know what skills he or she has trouble with at home. Please use the checklist below rating your child **good** or **poor** by placing a check in the appropriate column. Keep this form and bring it to our next meeting.

Name _____ Date _____

Your Child's Name _____

	Good	Poor
1. APPEARANCE (keeping neat and clean)		
2. MANNERS		
3. GETTING ALONG WITH ADULTS		
4. GETTING ALONG WITH FRIENDS		
5. BEING ON TIME		
6. ASKING FOR HELP WHEN NEEDED		
7. ACCEPTING HELP WHEN NEEDED		
8. BEING RESPONSIBLE –doing what he/she is asked to do		
9. MEETING OTHERS		
10. FOLLOWING RULES		

Additional Comments:

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