



FRANCISCAN VOLUNTEER MINISTRY

P.O. Box 29276 Philadelphia, PA 19125 215/427-3070 Fax: 215/427-3059 e-mail: fvmpd@aol.com

SELF-REFERENCE

NAME _____

Please complete the following questions and the survey on the back of this page. Return this form with your application to the FVM Office. Please type or print clearly in black ink.

1. What strengths and gifts could you bring to the Franciscan Volunteer Ministry?

2. In what areas do you think you need to grow?

3. Evaluate your ability to work and live with others.

4. What characterizes your work style? (For example, energy, persistence, initiative, resourcefulness, self-reliance, organization, etc.).

5. For what type of work are you best suited?

List **three** adjectives that best describe you:

Circle the number that best describes the applicant in the following areas (five being the highest).

CHARACTERISTICS

COMMENTS

Health, Stamina	1	2	3	4	5
Presentability	1	2	3	4	5
Self-confidence	1	2	3	4	5
Sense of Humor	1	2	3	4	5
Social Maturity	1	2	3	4	5
Ability to Get Along with Others	1	2	3	4	5
Emotional Stability	1	2	3	4	5
Common Sense	1	2	3	4	5
Dependability	1	2	3	4	5
Sensitivity to Others	1	2	3	4	5
Tact	1	2	3	4	5
Ability to Make Decisions	1	2	3	4	5
Initiative	1	2	3	4	5
Creativity	1	2	3	4	5
Flexibility	1	2	3	4	5
Acceptance of Criticism	1	2	3	4	5
Effective Use of Time	1	2	3	4	5
Ability to Express Feelings	1	2	3	4	5
Ability to Work with Others	1	2	3	4	5
Ability to Work Alone	1	2	3	4	5
Leadership	1	2	3	4	5
Ability to Work Under Pressure	1	2	3	4	5
Ability to Adapt to New Situations	1	2	3	4	5
Knowledge of Own Limits	1	2	3	4	5
Caring for Own Needs	1	2	3	4	5
Seeking Integration of Faith with Own Life	1	2	3	4	5
Openness to Different Expressions of Faith	1	2	3	4	5

Please feel free to use another piece of paper for additional comments.

Signature

Date