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HRDG 4413 - Career Enhancement Program - Exhibit C

Last Modified:

**Section D-Documentation
Exhibit C--Sample Supervisory Assessment
Qualification Statement**

**CAREER ENHANCEMENT
PROGRAM**

Announcement Number: _____

**CAREER ENHANCEMENT PROGRAM
SUPERVISORY ASSESSMENT QUALIFICATION STATEMENT**

APPLICANT'S NAME: _____

POSITION FOR WHICH APPLYING: _____

INSTRUCTIONS: Based on personal knowledge of the applicant, please evaluate the applicant's potential to perform each job element shown below by checking the appropriate column:

KNOWLEDGE, SKILLS, OR ABILITIES NEEDED	COMPLETELY TRUE	MORE TRUE THAN FALSE	MORE FALSE THAN TRUE	NOT TRUE	DON'T KNOW
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Knowledge of Program, Agency,
and Departmental regulations,
policies and procedures and
other administrative laws and
regulations applicable to
assigned areas of responsibility.

Ability to follow policies and
procedures.

Ability to accept responsibility and initiate action.

Ability to evaluate facts and make decisions.

Ability to communicate in writing in order to prepare reports and respond to requests for information.

Ability to communicate orally in order to obtain and provide information.

Ability to compile, analyze, and evaluate data for reports and to respond to special requests.

COMMENTS: _____

SUPERVISOR'S SIGNATURE & TITLE DATE

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