

**Career Visions Transition Evaluation Form**  
**Middle School**  
Revised 8/07



Name: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Birthdate: \_\_\_\_\_

1) If you could have any job in the world, what would it be?

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2) What do you like to do in your free time?

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3) Why do you think you would make a good worker?

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4) Have you ever worked or volunteered someplace before?

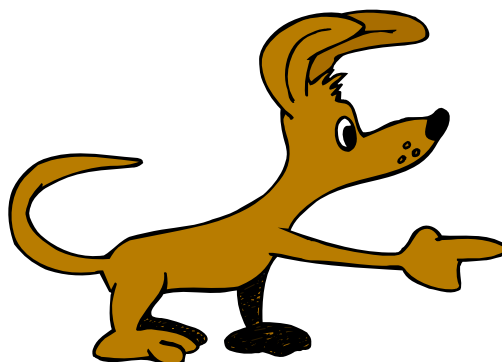
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5) Would you like to have a job?

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**Please turn this form over to continue....**



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**Middle School**  
**Student Requested Services**  
Revised 8/07



Please put a check mark next to all that you would find interesting:

**Career Related Exploration Trips / Guest Speakers**

- \_\_\_\_\_ Occupational Center / Trade School
- \_\_\_\_\_ Animal Care / Nature Center
- \_\_\_\_\_ Auto Repair
- \_\_\_\_\_ Child Care
- \_\_\_\_\_ Aircraft /Aviation
- \_\_\_\_\_ Computers (Graphic Arts / Animation / Repair / Programming)
- \_\_\_\_\_ Firefighting / Police / Protective Services
- \_\_\_\_\_ Money / Banking / Stock Market
- \_\_\_\_\_ Hotel / Restaurant / Hospitality
- \_\_\_\_\_ Hospital / Medical
- \_\_\_\_\_ Welding / Metal Fabrication
- \_\_\_\_\_ Working at the Mall / Retail
- \_\_\_\_\_ Cosmetology (Hair, Nails, Skin) / Fashion
- \_\_\_\_\_ Culinary Arts / Food Science
- \_\_\_\_\_ Other: \_\_\_\_\_

**Please note that we will make every effort to grant your requests.**  
**Completing this form does not guarantee participation.**

Please Sign Here: \_\_\_\_\_