

Pre-Employment Assessment Questionnaire

Please complete all sections of this questionnaire. This document will be used as part of our evaluation process. You may type your answers directly into the fields below before printing, or print the document first and complete it by hand.

1. Personal & Contact Information

Full Name:

Phone Number:

Email Address:

Position Applied For:

Date of Availability:

2. Professional Experience & Role Fit

Question 1: Briefly describe your primary motivation for applying to this position.

Question 2: What are the top three professional skills you possess that directly align with this role?

Skill 1:

Skill 2:

Skill 3:

Question 3: Describe a challenging workplace scenario you experienced and how you resolved it.

Question 4: What type of work environment allows you to perform at your best?

3. Situational Judgment

Scenario A: You are working on a high-priority project with a tight deadline, and you realize a critical error was made by a team member. How do you handle this situation?

Scenario B: A customer or client is highly dissatisfied with a service/product and is expressing frustration. What steps do you take to de-escalate the situation?

4. Compensation & Preferences

Desired Annual Salary / Hourly Rate:

Preferred Work Schedule (e.g., Full-time, Part-time, Shift work):

Are you willing to travel if required? (Yes/No):

Are you legally authorized to work in this country? (Yes/No):

5. Declaration & Signature

I certify that all information provided in this questionnaire is true, complete, and accurate to the best of my knowledge.

Applicant Signature (Print Name):

Date: