Occupational Questionnaire


1. Name of occupation

2. Specific kinds of duties of occupation:

3. Organizations for employment:

4. Opportunities for advancement:

5. Education requirements:

6. Degree of job pressure:

7. How many hours per week are required for work? How many are needed for peak performance?

8. Would work affect your personal health?

9. What abilities or personal qualities would you bring to the occupation?

10. What personal deficiencies would make success in the occupation difficult for you?

11. What major satisfactions would be derived?

12. What personal needs would definitely not be satisfied?

13. Describe the lifestyle of people in the occupation?