



**For Staff use only:**

Client Name: \_\_\_\_\_

Client ID number: \_\_\_\_\_

Client email: \_\_\_\_\_

Client phone number: \_\_\_\_\_

**For staff facilitation use only (in person, by phone or direct email). Do not post online. Before candidates complete this assessment, be sure to review information describing each of the nine certificate programs. Please note this assessment is designed to help evaluate a potential scholarship recipient's program fit and likelihood for success. No personal information is collected.**

**1. This training is online. Please rate your personal computer skills.**

- None
- Very little (can do email, shop online)
- Average (can do email, shop online, search for information, use Microsoft Word)
- Above average (can email, shop, search, use Microsoft Office, Excel, and PowerPoint)
- Advanced (email, shop, search, use Microsoft Office, troubleshoot, set up new equipment, etc.)

**2. Do you have access to a laptop, tablet, or personal computer?**

- Yes
- No

**3. If no, do you need assistance in locating computer access?**

- Yes
- No

**4. What certificate(s) are you most interested in? Select all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> Data analytics                   | <input type="checkbox"/> Python                  |
| <input type="checkbox"/> IT support                       | <input type="checkbox"/> Advanced Data Analytics |
| <input type="checkbox"/> Project/Program management       | <input type="checkbox"/> Business Intelligence   |
| <input type="checkbox"/> UX (User Experience) design      | <input type="checkbox"/> Cybersecurity           |
| <input type="checkbox"/> Digital Marketing and E-Commerce | <input type="checkbox"/> None of the above       |

**5. Do you have any previous experience/education in any of these fields? Select all that apply.**

- |  |   |
|--|---|
| <input type="checkbox"/> Data analytics              | <input type="checkbox"/> Digital Marketing and E-Commerce |
| <input type="checkbox"/> IT support                  | <input type="checkbox"/> Advanced Data Analytics          |
| <input type="checkbox"/> Project/Program management  | <input type="checkbox"/> Business Intelligence            |
| <input type="checkbox"/> Python                      | <input type="checkbox"/> Cybersecurity                    |
| <input type="checkbox"/> UX (User Experience) design | <input type="checkbox"/> None of the above                |

**6. Which of these skills do you currently have? Select all that apply.**

- |  |  |
|--|--|
| <input type="checkbox"/> Design (graphic, CAD, drafting, artist, photographer, etc.) | <input type="checkbox"/> Data collecting         |
| <input type="checkbox"/> IT and/or computer assembly                                 | <input type="checkbox"/> Organizational/Planning |
|  | <input type="checkbox"/> Other _____             |

**7. Which of these areas interest you? Select all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> Analyzing data   | <input type="checkbox"/> Event or project planning |
| <input type="checkbox"/> Art              | <input type="checkbox"/> None of the above         |
| <input type="checkbox"/> Customer service |  |

**8. This training will require a commitment of six to 10 hours per week, or more. Do you have that time available?**

- Yes
- No

**9. This training is self-paced, and you will work on your own. Do you feel comfortable with that type of training?**

- Yes
- Don't know – I've never done it before
- No

**10. Why do you want to attend this training? Mark all that apply.**

- Increase my skills
- Case manager recommended
- Get a new or better job
- Thought it sounded interesting
- Start my own business

**11. Which part of the training do you think will be the most valuable? Mark all that apply.**

- All of it
- Access to a scholarship
- Hands on – I can do on my own schedule
- Don't know

**12. How will the skills you learn benefit you? Mark all that apply.**

- Personal growth
- Help start my own business
- Add to my resume
- Don't know
- Get a new or better job

**13. How would you rate your current knowledge/skill/ability on this topic on a scale of 1 to 5, with 1 being none and 5 being high?**

- 1 - No knowledge
- 4 - Better than average
- 2 - Some knowledge
- 5 - High – I could teach the class
- 3 - Average knowledge

**14. What do you hope to do differently when you have completed the course? Mark all that apply.**

- Nothing different
- Start my own business
- Get a new or better job
- Don't know
- Apply for promotion at current job

**15. Would you like assistance with any of the following MassHire Career Center services?**

**Mark all that apply.**

- Referrals to job opportunities
- Practice interviews
- Resume assistance
- Information about other training programs
- Job seeking skills training
- No, I don't need additional services