

CAREER SNAPSHOT QUESTIONNAIRE

Completing this questionnaire is the first step! Having a tool for development is essential to ensure that we gather as much information as possible to capture your personal and or professional endeavors. This questionnaire will aid Consulting Fields, LLC in preparing the documents listed in the package you purchased.

Please be as detailed as possible and if a question or statement does not apply to you, indicate N/A, and do not leave anything blank.

Upon completion of the questionnaire, please email to info@consultingfieldsservices.com.

Once received, your first drafts will be emailed to you within 3 business days, and your final documents within 7-10 business days.

We will contact you by the email listed below if we have additional questions or concerns.

SECTION I

Name (First, Middle, Last):

Professional email address:

(Must be checked daily and appropriately named)

Personalized LinkedIn URL:

Phone Number:

Address:

City:

State:

Zip code:

SECTION II

Purpose of this resume (position with different employer, position with same employer, an internship, an educational program):

Long-term Career Goal:

Short-term Career Goal:

Interested in Jobs located (City, State):

List top three job choices:

1st Choice:

2nd Choice:

3rd Choice:

Willing to relocate (If so, where):

Are there any special circumstances which might affect your resume (Employment Gaps, Criminal Record, Immigration/Eligibility concerns/issues, career change):

SECTION IV

Work Experience: List your most recent 5 positions to the latest positions. If more space is needed, please continue your answer to the last question of this questionnaire.

1. Employer:

Location (City, State):

Position Title:

Date Range (Month/Year):

Salary/ Hourly Rate:

Series and Grade:

Duties/Responsibilities/Accomplishments:

2. Employer:

Location (City, State):

Position Title:

Date Range (Month/Year):

Salary/ Hourly Rate:

Series and Grade:

Duties/Responsibilities/Accomplishments:

3. Employer:

Location (City, State):

Position Title:

Date Range (Month/Year):

Salary/ Hourly Rate:

Series and Grade:

Duties/Responsibilities/Accomplishments:

4. Employer:

Location (City, State):

Position Title:

Date Range (Month/Year):

Salary/ Hourly Rate:

Series and Grade:

Duties/Responsibilities/Accomplishments:

5. Employer:

Location (City, State):

Position Title:

Date Range (Month/Year):

Salary/ Hourly Rate:

Series and Grade:

Duties/Responsibilities/Accomplishments:

SECTION V

List your Education/ Certifications/Professional Licenses/ Relevant Courses-Seminars/Workshops

1. College/University:

City, State:

Major:

Degree:

Year:

GPA:

Honors:

2. College/University:

City, State:

Major:

Degree:

Year:

GPA:

Honors:

3. High School:

City, State:

Year:

Certifications/ Year:

Professional Licenses/ Year:

What skills and or experience do you possess in the following: Foreign language-fluency verbal/written, hobbies, typing-words per min, Computer skills- internet, e-mail, Microsoft Word Applications (Access, Excel, Word, PowerPoint, Outlook), Community Activities Volunteer/Offices Held:

Relevant Courses/ Seminars/ Workshops:

SECTION VI

Military / Military Spouse / Veteran: By law, Veterans who are disabled or who served on active duty during certain specified time periods or in military campaigns are entitled to preference over non Veterans both in hiring from competitive lists and in retention during reductions in force.

A VA disability percentage determines a level of Veteran preference that you will receive if applying for government/ state positions. Also, you will need to provide a copy of your DD-214s (Certificate of Release or Discharge from Active Duty), and VA Disability Preference Letter for us to complete your SF-15 (Application for 10-point Preference), SF- 50 (Notification of Personnel Actions), and or OF-306 (Declaration for Federal Employment).

Military Spouses can also receive preference when applying for civil service / government positions.

Branch of Service:

Years of Service:

Are you still serving or retired (Y/N)?

Highest Rank Achieved/ Position Title:

Discharge Type (Honorable, Dishonorable, Other Than Honorable:

(You will need to email a copy of your DD214 to be uploaded to your usajobs.gov profile)

Active Security Clearance (Y/N)?

Expiration:

Key/ Special Recognition and awards:

Did you file for Veteran Affairs (VA) Disability?

If so, what percentage?

(You will need to email a copy of your preference letter which annotates your percentage amount to be uploaded to your usajobs.gov profile)

SECTION VII

References: Good practice is to always receive permission prior to listing individuals as references. The individuals you list should be able to speak to your skills, character, dependability, abilities, and life in general. (3) references if you are new to the market, (3-6) references if you are applying for a more senior role.

- Name:

Employer:

Professional Title:

Address:

Email Address/ Phone Number:

- Name:

Employer:

Professional Title:

Address:

Email Address/ Phone Number:

- Name:

Employer:

Professional Title:

Address:

Email Address/ Phone Number:

- Name:

Employer:

Professional Title:

Email Address/ Phone Number:

- Name:

Employer:

Professional Title:

Address:

Email Address/ Phone Number:

- Name:

Employer:

Professional Title:

Address:

Email Address/ Phone Number:

SECTION VIII

Additional Information: Please provide any additional information that you feel should be included on your resume, but was not addressed specifically in the above questions and statements:

CONSULTING FIELDS