

**LEARNER’S SELF-ASSESSMENT**

*“Enabling transformation and change through trained educators and youth workers and inclusive workplace environments by creating an innovative methodology and resources for the development of life skills and employability competences in young adults with learning disabilities and difficulties, while supporting their transition into inclusive workplaces.”*

Dear mentees,

This is your form to help you track your work progress. At the end of this form, we provided an example of a completed form. Have a look at it before completing your form.   
Now, take a moment to think about the work you have done in the past few days: the goals you set with your mentor, what made your work easier, the challenges or obstacles you faced, and answer the questions based on your experience.  
This will help you understand your progress, and to improve your communication at work.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Mentor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Mentee’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Before you start, keep in mind that at first, there may be many areas for improvement. Focus on key priorities and consider the time needed for meaningful progress.

### **GOALS**

Were all previously set goals achieved? **𝤿 YES 𝤿 NO**

If not, list the goals that weren’t achieved:  
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Why weren’t the goals achieved?  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Weekly Goal(s):**This week, I want to improve:  
   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**
2. **Monthly Goal(s):**This month I want to improve:  
   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**
3. **Six-Month Goal(s):**In the next six months I want to improve:  
   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

Answer the questions below using this scale:  
 1 - Strongly Disagree  
 2 - Disagree  
 3 - Neither Agree nor Disagree  
 4 - Agree  
 5 - Strongly Agree

**SKILLS AND WORK HABITS:**

1 - 2 - 3 - 4 - 5 I know what I have to do when I come to work.

1 - 2 - 3 - 4 - 5 I know my work schedule.

1 - 2 - 3 - 4 - 5 My focus on tasks is better than last time I filled the form.

1 - 2 - 3 - 4 - 5 I managed to complete the task entirely without getting distracted.

1 - 2 - 3 - 4 - 5 I managed to complete the task entirely without getting frustrated.

1 - 2 - 3 - 4 - 5 I know how to get to work by myself.

1 - 2 - 3 - 4 - 5 My work skills have improved since my last self-assessment.

**UNDERSTANDING INSTRUCTIONS/TASKS:**

1 - 2 - 3 - 4 - 5 I understand the instruction that my mentor gives me.

**ATTITUDE TOWARDS WORK:**

1 - 2 - 3 - 4 - 5 It is easy for me to wake up and go to work.

1 - 2 - 3 - 4 - 5 My work is important to me.

1 - 2 - 3 - 4 - 5 I like my job.

**COMMUNICATION:**

1 - 2 - 3 - 4 - 5 I understand what my mentor says.

1 - 2 - 3 - 4 - 5 I have no problem talking to my coworkers.

1 - 2 - 3 - 4 - 5 I know **how** to ask for help if I have a problem.

1 - 2 - 3 - 4 - 5 I know **who** to ask for help if I have a problem.

**EMOTIONAL STATE**

1 - 2 - 3 - 4 - 5 My work makes me feel anxious.

1 - 2 - 3 - 4 - 5 My work makes me feel happy.

1 - 2 - 3 - 4 - 5 My work makes me feel angry. ¸

1 - 2 - 3 - 4 - 5 My work makes me feel sad.

1 - 2 - 3 - 4 - 5 My mentor makes me feel anxious.

1 - 2 - 3 - 4 - 5 I like my mentor.

1 - 2 - 3 - 4 - 5 I feel like my mentor understands me.

**ADDITIONAL COMMENTS & QUESTIONS**

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