Career Follow-up In-take Form SWC - Career Center

Name	SWC ID#		
E-mail Address	Telephone #		
What semester at SWC?Are you in EOPS?	A graduate fromAffiliated organization	High School	
Do you have any learning difficulties?			
Why are you attending college?			
How do you feel about your current co		erience?: (check one) POOR	
Interest and Hobbies:	_		
Describe your "best and worst work ex			
Are you working? Yes / No If Where?	•		
If you could do anything or be anything	gregardless of mo	ney or educationwhat would it be	
What are your greatest strengths and sh	kills?		
In what areas do you need improvemen	nt?		

List the THREE careers you researched:

CAREER		MAJOR	SALARY	
List three goals in you	our life:		,	
2)				
3)				
What do want to get	out of this Caree	er Follow-up Appoint	ment?	
Who referred you to	the career cente	er? (circle one)		
COUNSELOR	TEACHER	SELF-REFERREI	O STUDENT	OTHER