

BRINGING OUT THE BEST IN OTHERS

SURVEY

Name: _____

Date: _____

Survey Questions:

	Yes	No	Never discussed
1. Do I know what is expected of me at work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do I have the materials and equipment I need to do my work right?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. At work, do I have the opportunity to do what I do best everyday?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. In the last seven days, Have I received recognition Or praise for doing good work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does my supervisor or someone at work seem to care about me as a person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is there someone at work who encourages my development?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. At work, do my opinions seem to count?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the mission of _____ make Me feel my job is important?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Are my co-workers committed to do quality work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Do I have a best friend at work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. In the last six months, has someone at work talked to me about my progress?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. This last year, have I had the opportunity at work to learn and grow?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>