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# **HRDG 4413 - Career Enhancement Program - Exhibit C**

Last Modified:

**Section D-Documentation**  
**Exhibit C--Sample Supervisory Assessment**  
**Qualification Statement**

**CAREER ENHANCEMENT**  
**PROGRAM**

**Announcement Number:** \_\_\_\_\_

**CAREER ENHANCEMENT PROGRAM**  
**SUPERVISORY ASSESSMENT QUALIFICATION STATEMENT**

**APPLICANT'S NAME:** \_\_\_\_\_

**POSITION FOR WHICH APPLYING:** \_\_\_\_\_

**INSTRUCTIONS:** Based on personal knowledge of the applicant, please evaluate the applicant's potential to perform each job element shown below by checking the appropriate column:

| <b>KNOWLEDGE, SKILLS, OR<br/>ABILITIES NEEDED</b> | <b>COMPLETELY<br/>TRUE</b> | <b>MORE<br/>TRUE<br/>THAN<br/>FALSE</b> | <b>MORE<br/>FALSE<br/>THAN<br/>TRUE</b> | <b>NOT<br/>TRUE</b> | <b>DON'T<br/>KNOW</b> |
|---|----------------------------|---|---|---------------------|-----------------------|
|---|----------------------------|---|---|---------------------|-----------------------|

Knowledge of Program, Agency,  
and Departmental regulations,  
policies and procedures and  
other administrative laws and  
regulations applicable to  
assigned areas of responsibility.

Ability to follow policies and  
procedures.

Ability to accept responsibility  
and initiate action.

Ability to evaluate facts and  
make decisions.

Ability to communicate in writing  
in order to prepare reports and  
respond to requests for  
information.

Ability to communicate orally in  
order to obtain and provide  
information.

Ability to compile, analyze, and  
evaluate data for reports and to  
respond to special requests.

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**SUPERVISOR'S SIGNATURE & TITLE DATE**

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