**SELF ASSESSMENT FORM**

**Name: Date:**

**Class: Date of Birth:**

**Address and Phone Number:**

Please share details about yourself as requested below. (Fill it as soft copy and can exceed the page limit)

|  |  |
| --- | --- |
| Information required | Your descriptive feedback |
| Your dream professions and aspirations and why? (Atleast 3) |  |
| Interested subjects as of now  (school subjects / any other in order of preference) |  |
| Hobbies, Interests, Favourite Extra curricular activities |  |
| Additional skills acquired (certificates, medals, self learning so far in any field) |  |
| Qualities you like about yourself |  |
| Qualities your friends admire in you |  |