



CAREER PORTFOLIO

STUDENT NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

BIRTH DATE _____

GRADUATION DATE _____

WORK PERMIT # _____

SENDING DISTRICT _____

THE FOLLOWING DOCUMENTS ARE INCLUDED IN THIS FOLDER

- | | |
|---|---|
| <input type="checkbox"/> RESUME | <input type="checkbox"/> SAMPLE COMPLETED JOB APPLICATION |
| <input type="checkbox"/> POS TASK LIST | <input type="checkbox"/> AWARDS/OTHER |
| <input type="checkbox"/> RECOMMENDATION LETTERS | <input type="checkbox"/> INDUSTRY RECOGNIZED CERTIFICATIONS |
| <input type="checkbox"/> TRANSCRIPT | <input type="checkbox"/> COMMUNITY SERVICE/VOLUNTEER |
| | <input type="checkbox"/> CAPSTONE AND/OR WORK EXPERIENCE |

Instructions: Complete the forms printed on this folder. As you use this Career Portfolio to store various documents, update the information you recorded. All information in and on this folder should be current.

VOCATIONAL TRAINING

Vocational Training Area	Vocational Instructor's Name	School Phone	Home Phone

EXTRACURRICULAR ACTIVITIES / COMMUNITY ACTIVITIES

Activity	Responsibility	Office Held (if any)

HONORS AND AWARDS

STANDARD TESTS / VOCATIONAL ASSESSMENT

Test	Score

WORK EXPERIENCE

Company Name	Duties

REFERENCES

Name	Title	Address	Phone

OCCUPATIONAL PREFERENCES: _____

INTERESTS: _____

SPECIAL SKILLS: _____

TEACHER COMMENTS: _____

** The information in this folder has been compiled jointly by the student and the faculty.*

OTHER: _____
