

Strengths Assessment

Client Name:	Worker Name:	Meeting Frequency:
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Current Strengths: What are my current strengths? (i.e. talents, skills, personal and environmental strengths)	My Desires and Aspirations: What do I want?	Past Resources – Personal, Social, & Environmental: What strengths have I used in the past?
Home/Daily Living		
Assets - Financial/Insurance		
Employment/Education/Specialized Knowledge		

Wellness/Health		
Leisure / Recreational		
Spirituality/Culture		

What are my priorities?

- | | |
|----|----|
| 1. | 3. |
| 2. | 4. |
| 3. | |

Important things to know about me:

On a scale of 1 (very dissatisfied) to 5 (very satisfied), how satisfied are you with...					
Your current housing situation?	1	2	3	4	5
Your current employment situation?	1	2	3	4	5
Your current education situation?	1	2	3	4	5
The supportive relationships currently in your life?	1	2	3	4	5
Your current amount of community involvement?	1	2	3	4	5

1 = Very dissatisfied, 2 = Somewhat dissatisfied, 3 = Neither satisfied nor dissatisfied, 4 = Somewhat satisfied, 5 = Very satisfied