

Five Questions Tool

Me

Name:

Name:

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1. Foundational/
Background
 - Early?
 - Family?
 - Education?
 - Organizations?
 - Roles?
2. Strong Identity?
 - Personal role?
 - Career role?
 - Impact?
 - Process?
3. Kind of Person?
 - Way of thinking?
 - Pattern of speech?
 - Pattern of action?
4. What's Important?
 - In life?
 - For career?
 - As an outcome?
 - In the process?
5. What Interests?
 - Learning?
 - Work?
 - Personal?
