TEAM MEMBER FACT SHEET

Personal

Name:	Birthday:	
Address:	City of Birth:	

Your family relationships:

Name	Relationship	Birthday	Name	Relationship	Birthday
Pets:		· · · · · · · · · · · · · · · · · · ·	1		

Education/Experience

School/Company:	Degree/Role:	# of yrs	Key learning? / What I enjoyed most?
Professional Certifications:			·

My Gifts / My Needs

What things do I do extremely well? (str	What rewards do I most appreciate?		

Miscellaneous

Hobbies:			
My Favorite	Food:	Sport:	
Movie:	Restaurant:	Sports Team:	
Vacation:	Junk Food:	Way to relax:	
If I am not working, I am probably			
You will know I am stressed when			

Communication

Preference on how: (select one)	Email Phone Text Voicemail Face to Face
Response guarantee: (time)	

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Key questions a People-Centered Leader asks and answers:

If you were not doing this job, what would be your dream job?

What is one person you would love to have dinner with and what would you ask them?

What part of your job is more fun than hard?

What is the biggest mistake you ever made and what did it teach you?

What is the biggest behavioral change you have ever made?

Pick choices that BEST describe you: (select one answer for each statement)

*50/50 is provided for those choices when you feel right in the middle of the two options. If you struggle with an answer – ask someone who knows you well. (ie. teammate, spouse, best friend)

I most often judge my work by:	Is it done?		50 / 50		Is it right?	
When solving a problem, I tend to:	Look for the best way		50 / 50		Look for	a new way
I like to start meetings by:	Getting to work		50 / 50		Checking in with others	
I tend to:	Talk first		50 / 50		Listen/Think first	
My work style is:	Work first (w/ some planning)		50 / 50		Plan firs is critical!)	t (a good plan
I am most comfortable as a:	Leader		50 / 50		🗌 Team M	ember
My normal role in conflict is to:	Generate it		Keep/restore the peace		Avoid it	
When I am quiet, it usually means I am	Irritated	Hurt	Thinking		Checked Out	