



College and Career Competency Inventory (CCCI)

Name: Client Sample #1
Date: 2/26/18
Advisor: Trancee

For Office Use Only

RECOMMENDATION: _____

College and Career Competency Inventory (CCCI)

Please complete the following inventory. The information you present can help us become more knowledgeable about your individual experience and skills. With this information, it will be possible to determine the most effective way to verify your skills for fulfillment of the individualized College and Career Competency requirement.

Some of the information required may not apply to you. **Complete only those sections that specifically relate to your individual circumstances.** All information will be kept confidential.

1. Employment/Workforce Training Skills

Are you presently employed? ☒ Yes ☐ No (If no, please skip to Section B)

A. Job title: Arby's Line Cook

Company name: Arby's

Address: 549 Main St. Capital City, MN

Supervisor's name¹: Paul Botts

Briefly describe your duties and responsibilities using descriptions from O*NET where applicable.

cook food, prep, clean workspace

How long have you held this job? From: 11/1/17 To: present

How many hours per week do you work? 20-25

How many months per year do you work? 12

Prior to this job, did you hold any other jobs with this employer? ☐ Yes ☒ No (If no, please skip to Section B)

Supervisor's name¹: _____

Briefly describe your duties and responsibilities using descriptions from O*NET where applicable.

How long have you held this job? From: _____ To: _____

How many hours per week do you work? _____

How many months per year do you work? _____

¹ There will be no contact or communication with any current or previous supervisors without the express knowledge and consent from you the candidate.

- B. Please list any job(s) with previous employers² and when you have held them.

Job title: Burger World- Kitchen cook

Employer: Burger World

Dates worked From: '17 To: 6/17

Job title: _____

Employer: _____

Dates worked From: _____ To: _____

Job title: _____

Employer: _____

Dates worked From: _____ To: _____

- C. Have you had any job training? ☒ Yes [] No (If no, please skip to Section D)

What was it? Welding

Where were you trained? Capital Career Center

How long was the training? 1 year When were you trained? 2013

Did you receive a certificate upon completion? [] Yes ☒ No

- D. Do you hold any current workforce skills license(s) or certificate(s)? [] Yes ☒ No (If no, please skip to Section E)

What license(s) or certificate(s)? _____

By whom was it issued? (i.e., New York State) _____

When was it issued? _____ When does it expire? _____

- E. Do you give, or have you given, time to volunteer activities? [] Yes ☒ No (If no, please skip to Section F)

Position: _____

Organization name: _____

Address: _____

Contact name³: _____

Briefly describe your duties and responsibilities.

² There will be no contact or communication with any current or previous supervisors without the express knowledge and consent from you the candidate.

³ There will be no contact or communication with any current or previous agency contacts without the express knowledge and consent from you the candidate.

How long have you held this volunteer position? From: _____ To: _____

How many hours per week do you volunteer? _____

How many months per year do you volunteer? _____

F. Military Service

Have you served in the military? [] Yes [✓] No *(If no, please skip to Section G)*

In which branch did you serve? _____

Did you have any special training while in the military? [] Yes [] No

If yes, please describe:

Please describe your general duties while in military service:

G. Self-employed

Do you currently own your own business? [] Yes [✓] No *(If no, please skip to Specialized Skill)*

Company name: _____

Address: _____

Briefly describe your business including products and services.

How long have you owned this company? From: _____ To: _____

Briefly describe how you market your business, including such strategies as website, advertisements, business cards, and social media accounts.

Briefly describe how you document that income was realized for the business, such as examples of contracts, receipts for services, or tax forms.

2. Specialized Skill

Do you have any special skills or talents (e.g., art, music) that are different from those needed to perform your job or home responsibilities? ☒ Yes ☐ No

If yes, please describe:

welding

Have you used your special skills or talents for income or have you displayed or performed your talents for others outside of the home and beyond family and friends? ☐ Yes ☐ No

If yes, please describe:

Do you have, or have you had, any hobbies? ☐ Yes ☐ No

If yes, what are they?

3. Training and Education Plans

Do you plan to enter any job skills training after earning your high school diploma? ☒ Yes ☐ No

If yes, what type of job skills training will you seek?

Advanced Welding

Do you know where you plan to enroll? ☐ Yes ☒ No

If so, where? _____

Do you plan to attend college after earning your high school diploma? ☐ Yes ☒ No

Have you taken any college courses? ☐ Yes ☒ No

If yes, where and when?

Did you complete the courses required to earn a certificate or degree? ☐ Yes ☐ No

If yes, when was it issued? If applicable, when does the certificate expire?

4. Personal and Management Skills

How many years have you had experience with or been responsible for the management of a household? 7 years

Please indicate with an 'X' your responsibilities in your home and for the people with whom you live in regards to the following:

Management Task or Decision	Responsible	Not Responsible
Identifying educational alternatives for children such as childcare, preschool, and K-12 options		X
Purchase, selection, and use of home appliances including the use of warranties, cost-quality trade-offs, selecting a reliable dealer, evaluation of the features offered, credit terms, contracts, and use and care of the product	X	
Contract maintenance for utilities, cell phones, and the Internet	X	
Develop a plan for retirement including income, housing, insurance needs and options, and recognizing and planning for healthy lifestyles in retirement		X
Researching the benefits of legal documents such as wills, trusts, Power of Attorney, and Health Care Directives		X
Development of wills, trusts, estate planning, and elder care issues and resources		X
Household budget planning including the selection, purchase, and monitoring of health care plan(s); selection, purchase and monitoring of insurance plan(s); and planning for retirement		X
Home mortgage, including identification of home loan products		X
Overseeing consumer advocacy issues for the family (such as implementing strategies to avoid identify theft		X

Review of the College and Career Competency Inventory (CCCI)

1. Employment/ Workforce Training Skills

Option	Potential CCC	Not Applicable
Employment Experience		
Job Training		
Work Skills License		
Volunteer Work Experience		
Military Experience		
Self-employed Business Owner		

2. Specialized Skill

Option	Potential CCC	Not Applicable
Above average skill (e.g., music, art, photography)		
Potential source of income		
Performed or displayed skill or talent in public		

3. Training and Education Plans

Option	Potential CCC	Not Applicable
Plan to enter job skills training		
Plan to enter college		
Completed courses for certificate or degree		

4. Personal and Management Skills

Option	Potential CCC	Not Applicable
Holds primary responsibility for the management of the home <ul style="list-style-type: none"> No plans to enter employment or job skills training No specialized skill No plans to enter postsecondary training or education 		