

Skills Assessment Survey

(Click in block to type)

Name:

Type of vessel currently operating: Power/Sail/Other and LOA:

Experience on other boat types:

Experience on other size boats:

Additional boating experience

By placing a check in the appropriate space, please rate your experience/knowledge from 1-3 in the following areas (1 being little or no knowledge, 2 being an average working knowledge and 3 being very knowledgeable or experienced).

Experience/Knowledge	1	2	3
Accounting/Finance			
Art/Drawing			
Teaching			
Administration			
Personnel			
Photography			
Public Relations			
Writing (articles, etc.)			
Advertising/Marketing			
Computer or A/V			
Law			
Print/Publish			
Use of GPS			
Use of Radar			
Engine Maintenance and Repair			
Electronics Installation			