

Leadership Skills Assessment Sheet

Participant Information

Name:	<input type="text"/>	Date:	<input type="text"/>
Position / Role:	<input type="text"/>	Department:	<input type="text"/>

Self-Assessment

Leadership Skill	Description	Rating (1-5)	Comments
Communication		<input type="text"/>	<input type="text"/>
Decision Making		<input type="text"/>	<input type="text"/>
Team Building		<input type="text"/>	<input type="text"/>
Problem Solving		<input type="text"/>	<input type="text"/>
Delegation		<input type="text"/>	<input type="text"/>
Emotional Intelligence		<input type="text"/>	<input type="text"/>
Conflict Resolution		<input type="text"/>	<input type="text"/>

Overall Comments

Action Plan / Next Steps

