

Novotni Social Skills Checklist—Observer Report Version # 6181

Rater's Name:

Name of person to be rated:

Date:

TRAITS : Check the following traits of highly likeable people that are descriptive of this person?

- | | | | | | |
|-------------------------------------|--------------------------------------|--|--------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> sincere | <input type="checkbox"/> honest | <input type="checkbox"/> understanding | <input type="checkbox"/> loyal | <input type="checkbox"/> responsible | <input type="checkbox"/> friendly |
| <input type="checkbox"/> truthful | <input type="checkbox"/> trustworthy | <input type="checkbox"/> intelligent | <input type="checkbox"/> warm | <input type="checkbox"/> unselfish | <input type="checkbox"/> trustful |
| <input type="checkbox"/> thoughtful | <input type="checkbox"/> considerate | <input type="checkbox"/> reliable | <input type="checkbox"/> kind | <input type="checkbox"/> humorous | <input type="checkbox"/> cheerful |

Not a Problem	Needs Improvement	Skills: Use the following checklist to identify strengths as well as areas to work on that you have observed. Leave blank if not observed.
		I. BASIC Manners: The ability to do the following in social interactions.
<input type="checkbox"/>	<input type="checkbox"/>	Uses mannerly words like please, thank you, and you're welcome
<input type="checkbox"/>	<input type="checkbox"/>	Expresses appreciation
<input type="checkbox"/>	<input type="checkbox"/>	Receives compliments without discounting
<input type="checkbox"/>	<input type="checkbox"/>	Gives compliments regularly to others
<input type="checkbox"/>	<input type="checkbox"/>	Apologizes
<input type="checkbox"/>	<input type="checkbox"/>	Accepts the apology of others
<input type="checkbox"/>	<input type="checkbox"/>	Introduces him/herself
<input type="checkbox"/>	<input type="checkbox"/>	Introduces others
<input type="checkbox"/>	<input type="checkbox"/>	Uses appropriate greetings
<input type="checkbox"/>	<input type="checkbox"/>	Uses appropriate ending comments
<input type="checkbox"/>	<input type="checkbox"/>	Phone manners
<input type="checkbox"/>	<input type="checkbox"/>	Mealtime behaviors (follows lead of host/hostess, chews with mouth closed, not open)
<input type="checkbox"/>	<input type="checkbox"/>	Asks to have items passed, use napkins, elbows off the table, ask to be excused
<input type="checkbox"/>	<input type="checkbox"/>	Makes others feel comfortable in your home—hosting
<input type="checkbox"/>	<input type="checkbox"/>	Offers to help others
		II. VERBAL COMMUNICATION SKILLS: In conversation with others the ability to:
<input type="checkbox"/>	<input type="checkbox"/>	Joins a conversation without disruption
<input type="checkbox"/>	<input type="checkbox"/>	Checks—repeats what you heard and asks if you heard it right
<input type="checkbox"/>	<input type="checkbox"/>	Identifies and reflects content of conversation—tracking
<input type="checkbox"/>	<input type="checkbox"/>	Identifies and reflects feelings of others
<input type="checkbox"/>	<input type="checkbox"/>	Reflects content + feelings in conversations
<input type="checkbox"/>	<input type="checkbox"/>	Uses minimal encouragers to let others know he or she is following the conversation
<input type="checkbox"/>	<input type="checkbox"/>	Uses open questions to keep conversations going
<input type="checkbox"/>	<input type="checkbox"/>	Asks for help when needed or desired
		III. NONVERBAL COMMUNICATION SKILLS: Looking attentive when listening. When talking with others do you:
<input type="checkbox"/>	<input type="checkbox"/>	Keeps an open posture
<input type="checkbox"/>	<input type="checkbox"/>	Faces the person
<input type="checkbox"/>	<input type="checkbox"/>	Leans forward
<input type="checkbox"/>	<input type="checkbox"/>	Maintains appropriate eye contact
<input type="checkbox"/>	<input type="checkbox"/>	Looks relaxed
		IV. COMMUNICATION ROADBLOCKS
<input type="checkbox"/>	<input type="checkbox"/>	Misses pieces of information—"blinks"
<input type="checkbox"/>	<input type="checkbox"/>	Uses closed or naked questions
<input type="checkbox"/>	<input type="checkbox"/>	Voice too loud or too soft

<input type="checkbox"/>	<input type="checkbox"/>	Speaks too quickly
<input type="checkbox"/>	<input type="checkbox"/>	Interrupts others
<input type="checkbox"/>	<input type="checkbox"/>	Too quiet—rarely speaking in conversations
<input type="checkbox"/>	<input type="checkbox"/>	Talks excessively
<input type="checkbox"/>	<input type="checkbox"/>	Order sor bosses others
<input type="checkbox"/>	<input type="checkbox"/>	Criticizes—judges or evaluates others
<input type="checkbox"/>	<input type="checkbox"/>	Minimizes or is not considerate
		V. ORGANIZATIONAL SKILLS—TRUSTWORTHY
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty with deadlines
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty being on time for meetings and appointments
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty remembering special occasions
<input type="checkbox"/>	<input type="checkbox"/>	Too organized, rigid
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty managing money, bills, bank accounts, etc.
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty organizing your stuff
<input type="checkbox"/>	<input type="checkbox"/>	Does what you agree to do
<input type="checkbox"/>	<input type="checkbox"/>	Finishes projects
		VI. SELF CONTROL
<input type="checkbox"/>	<input type="checkbox"/>	Takes turns/wait
<input type="checkbox"/>	<input type="checkbox"/>	Ability to handle
<input type="checkbox"/>	<input type="checkbox"/>	Effectively manages conflict, negotiates, and compromises
<input type="checkbox"/>	<input type="checkbox"/>	Effectively manages anger
<input type="checkbox"/>	<input type="checkbox"/>	Refrains from aggressive behavior
<input type="checkbox"/>	<input type="checkbox"/>	Assertiveness
<input type="checkbox"/>	<input type="checkbox"/>	Impulsive spending
<input type="checkbox"/>	<input type="checkbox"/>	Impulsive decision-making
<input type="checkbox"/>	<input type="checkbox"/>	Filters thoughts avoiding impulsive words—blurting out things that hurt people
<input type="checkbox"/>	<input type="checkbox"/>	Inappropriate touching of others
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty relaxing
<input type="checkbox"/>	<input type="checkbox"/>	Excessive physical activity (trouble staying seated, fidgeting, feeling restless)
		VII. KNOWLEDGE
<input type="checkbox"/>	<input type="checkbox"/>	Understands attribution theory's role in social relationships
<input type="checkbox"/>	<input type="checkbox"/>	Understands the importance of social exchange theory—give and take in relationships
<input type="checkbox"/>	<input type="checkbox"/>	Understands the subtle cues that you give others with your body language
<input type="checkbox"/>	<input type="checkbox"/>	Ability to pick up the subtext—socially perceptive
<input type="checkbox"/>	<input type="checkbox"/>	Understands context
		VIII. RELATIONSHIPS
<input type="checkbox"/>	<input type="checkbox"/>	Sensitive to the needs of others
<input type="checkbox"/>	<input type="checkbox"/>	Patient
<input type="checkbox"/>	<input type="checkbox"/>	Creative
<input type="checkbox"/>	<input type="checkbox"/>	Fun to be with
<input type="checkbox"/>	<input type="checkbox"/>	Flexible—able to go with the flow
<input type="checkbox"/>	<input type="checkbox"/>	Respect boundaries of others
<input type="checkbox"/>	<input type="checkbox"/>	Treat others with respect
<input type="checkbox"/>	<input type="checkbox"/>	Tolerance to differences of others
<input type="checkbox"/>	<input type="checkbox"/>	Initiate invitations to others
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty with intimacy
<input type="checkbox"/>	<input type="checkbox"/>	Has at least three close friends
		IX. SELF CARE
<input type="checkbox"/>	<input type="checkbox"/>	Ability to nurture yourself
<input type="checkbox"/>	<input type="checkbox"/>	Appearance—clean, neat, and appropriate for situations

<input type="checkbox"/>	<input type="checkbox"/>	Ability to identify and express your feelings
<input type="checkbox"/>	<input type="checkbox"/>	Self-esteem
<input type="checkbox"/>	<input type="checkbox"/>	Participates in support groups
<input type="checkbox"/>	<input type="checkbox"/>	Sense of humor
<input type="checkbox"/>	<input type="checkbox"/>	Positive outlook—hope

SKILL AREAS TO WORK ON: Check the box to the left of each skill area that you think this person should work on.

<input type="checkbox"/>	Basic Manners
<input type="checkbox"/>	Verbal Communication Skills
<input type="checkbox"/>	Nonverbal Communication Skills
<input type="checkbox"/>	Communication Roadblocks
<input type="checkbox"/>	Organizational Skills
<input type="checkbox"/>	Self-control
<input type="checkbox"/>	Knowledge
<input type="checkbox"/>	Relationships
<input type="checkbox"/>	Self-care

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