

Name: _____
 Gender: _____
 Height: _____
 Weight: _____
 Date of Birth: _____ *Gestalt Dice!*



TEST RESULT FORM

Testing Center: _____
 Administrator: _____
 Date: _____



The following information is to be used by the administrator for diagnostic purposes. It represents the results of their taking the SPEW-AI (Strength, Perception, Empathy, and Will Assessment Inventory).

Strength: _____

Participant showed exceptional ability in STRENGTH in the following

Skills

Perception: _____

Participant showed exceptional ability in PERCEPTION in the following

Skills

Empathy: _____

Participant showed exceptional ability in EMPATHY in the following

Skills

Will: _____

Participant showed exceptional ability in WILL in the following

Skills

Equipment:

Name	Bonus	CU
_____	_____	_____
_____	_____	_____
_____	_____	_____

