

## Extended DISC Personal Analysis

### Individual information

Please fill in the following fields before starting

#### Required information

Last name	<input type="text" value="Physician"/>
First name	<input type="text" value="Anonymous"/>
Organization	<input type="text" value="Physician"/>
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Email address	<input type="text"/>
Native language	<input type="text"/>
Country of residence	<input type="text"/>

#### Optional information

Year of birth	<input type="text"/>
Education	<input type="text"/>
Additional information	<input type="text"/>

## Do You Know Your Personality Type?

Please take a few minutes to complete this online personality assessment. It will provide helpful information concerning your key personality traits as they compare with other practitioners in your medical specialty. The results will be anonymous. We will send confidentially to the e-mail address you provide your own DISC profile, and later on an anonymous composite assessment of other fellow providers' personality profiles. We hope you enjoy this exercise of self-discovery as it relates to your personal and professional life.

1/44. Which of the following best describes your title?

<input type="checkbox"/>	Physician
<input type="checkbox"/>	Med School Student
<input type="checkbox"/>	Resident or Fellow
<input type="checkbox"/>	Department Chair / Head
<input type="checkbox"/>	Academic
<input type="checkbox"/>	Other

2/44. Which of the following best describes your specialty?

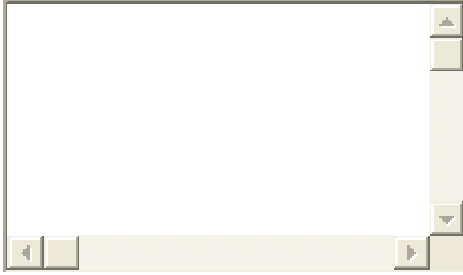
<input type="checkbox"/>	Allergy and Immunology
<input type="checkbox"/>	Ambulatory Care
<input type="checkbox"/>	Anesthesiology
<input type="checkbox"/>	Cardiology
<input type="checkbox"/>	Cardiothoracic Surgery
<input type="checkbox"/>	Colon and Rectal Surgery
<input type="checkbox"/>	Dermatology
<input type="checkbox"/>	Emergency Medicine
<input type="checkbox"/>	Endocrinology
<input type="checkbox"/>	Family Practice
<input type="checkbox"/>	Gastroenterology
<input type="checkbox"/>	Hematology / Oncology
<input type="checkbox"/>	Hospitalist
<input type="checkbox"/>	Infectious Diseases
<input type="checkbox"/>	Internal Medicine, General
<input type="checkbox"/>	Nephrology
<input type="checkbox"/>	Neurology
<input type="checkbox"/>	Neurosurgery
<input type="checkbox"/>	Nuclear Medicine
<input type="checkbox"/>	Obstetrics / Gynecology
<input type="checkbox"/>	Occupational Medicine
<input type="checkbox"/>	Oncology
<input type="checkbox"/>	Ophthalmology
<input type="checkbox"/>	Orthopedic Surgery
<input type="checkbox"/>	Otolaryngology
<input type="checkbox"/>	Pathology
<input type="checkbox"/>	Pediatrics, General

<input type="checkbox"/>	Physical Medicine and Rehabilitation
<input type="checkbox"/>	Preventive Medicine
<input type="checkbox"/>	Psychiatry (Adult)
<input type="checkbox"/>	Psychiatry (Child and Adolescent)
<input type="checkbox"/>	Pulmonary Medicine
<input type="checkbox"/>	Radiation Oncology
<input type="checkbox"/>	Radiology
<input type="checkbox"/>	Rheumatology
<input type="checkbox"/>	Sleep Medicine
<input type="checkbox"/>	Sports Medicine
<input type="checkbox"/>	Surgery, General
<input type="checkbox"/>	Urology
<input type="checkbox"/>	Other

3/44. Which of the following best describes your practice?

<input type="checkbox"/>	Private, solo practice
<input type="checkbox"/>	Single or multi-specialty group
<input type="checkbox"/>	Hospital-based / hospital employed
<input type="checkbox"/>	Practice management company
<input type="checkbox"/>	Locum tenens physician / independent contractor
<input type="checkbox"/>	Retired
<input type="checkbox"/>	Other

4/44. In which zip code is your workplace located? (Open End)



5/44. I bring enthusiasm and energy to my job

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

6/44. I bring the right blend of knowledge and "know how" to my job

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

7/44. I bring the right blend of skills to my job

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

8/44. I am confident when performing my job

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

9/44. I am genuine and authentic while working on my job

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

10/44. In the short term my job stimulates me and makes me happy

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

11/44. In the short term my job is rewarding to do

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat

<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

12/44. In the long term my job provides meaning to me

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

13/44. In the long term my job helps me learn and grow

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

14/44. Overall I feel grateful for my job and it is a great use of my time

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

15/44. I enjoy the practice of medicine

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

16/44. I have the materials, resources and equipment I need to do my job right

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

17/44. At work, I have the opportunity to do what I do best every day

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

18/44. I chose the right specialty for me

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral

<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

19/44. The investment I have made in education and hours has been worthwhile

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

20/44. I am able to treat patients as I see fit, without colleague's interference

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

21/44. I am able to treat patients as I see fit, without colleagues' interference

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

22/44. At work, my opinions seem to count

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

23/44. I consider my colleagues friends and socialize with them outside of work

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

24/44. My physician colleagues are a source of professional stimulation

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

25/44. I work in a team-oriented atmosphere

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat

<input type="checkbox"/>	Strongly disagree
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26/44. Non-physician colleagues provide an adequate level of support

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

27/44. My patients are grateful for my help and for the treatment I provide

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

28/44. I feel a personal connection with patients; I make a difference in their lives

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

29/44. My patients need more than I can give; it's somewhat overwhelming

<input type="checkbox"/>	Strongly agree
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<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

30/44. I am a respected member of the community in which I practice

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

31/44. I have made a difference in the community in which I practice

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

32/44. I am compensated fairly for what I do

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Agree somewhat
<input type="checkbox"/>	Neutral
<input type="checkbox"/>	Disagree somewhat
<input type="checkbox"/>	Strongly disagree

33/44. The practice of medicine is a financially lucrative occupation

- |                          |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Strongly agree    |
| <input type="checkbox"/> | Agree somewhat    |
| <input type="checkbox"/> | Neutral           |
| <input type="checkbox"/> | Disagree somewhat |
| <input type="checkbox"/> | Strongly disagree |

34/44. My benefits package meets my needs

- |                          |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Strongly agree    |
| <input type="checkbox"/> | Agree somewhat    |
| <input type="checkbox"/> | Neutral           |
| <input type="checkbox"/> | Disagree somewhat |
| <input type="checkbox"/> | Strongly disagree |

35/44. Which of the following best describes you?

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | I am happy and fulfilled in my work.   |
| <input type="checkbox"/> | Some aspects of my work are frustrating, but for the most part, I'm happy    |
| <input type="checkbox"/> | I didn't get into medicine to do what I am doing now. I'm disillusioned.     |
| <input type="checkbox"/> | I'm burned out, but due to financial considerations, I must continue to work |
| <input type="checkbox"/> | I am currently making plans to retire within the next 3 years                |
| <input type="checkbox"/> | I am currently planning to pursue another career outside of medicine         |

36/44. Which of the following best describes your personal life?

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | I am happy in my personal life. It takes precedence over my career. |
|--------------------------|---|

My work consumes me and tends to interfere with my personal life

I have a good balance between my professional and personal life

37/44. Which of the following sports/physical activities do you participate in most often?

Team sports like football, basketball, soccer, baseball/softball, hockey, rugby

Personal fitness like aerobics, running, hiking, cycling, yoga, weightlifting

Water sports like boating, sailing, water skiing, swimming

Outdoor sports like fishing or hunting

Snow sports like skiing or snowboarding

Golf

Tennis

Other

None of the above

38/44. Which one of the following hobbies do you enjoy the most?

Artistic hobbies like crafts, photography, painting, pottery, ceramics

Gardening

Movies, cinema

Theater or opera

Listening to music, attending concerts

Gourmet cooking / dining / wine tastings

Playing musical instruments

Reading

Sewing / needlepoint

Travel

Web surfing / chat rooms

- Woodworking / carpentry
- Volunteering
- Other
- None of the above

39/44. Are you:

- Male
- Female

40/44. When were you born?

- Earlier than 1925
- Between 1925 and 1945
- Between 1946 and 1954
- Between 1955 and 1964
- Between 1965 and 1979
- Since 1980

41/44. Which of the following best describes your annual income?

- Less than \$150,000
- Between \$150,000 and \$199,999
- Between \$200,000 and \$249,999
- Between \$250,000 and \$299,999
- Between \$300,000 and \$349,999
- Between \$350,000 and \$399,999
- Between \$400,000 and \$449,999

<input type="checkbox"/>	Between \$450,000 and \$499,999
<input type="checkbox"/>	More than \$500,000

42/44. Which of the following best describes your marital status?

<input type="checkbox"/>	Single
<input type="checkbox"/>	Separated / Divorced
<input type="checkbox"/>	Married / Significant Other
<input type="checkbox"/>	Widowed
<input type="checkbox"/>	Other

Please select an option or press skip button.

43/44. Which of the following best describes your race / ethnicity?

<input type="checkbox"/>	Caucasian
<input type="checkbox"/>	African American
<input type="checkbox"/>	Hispanic
<input type="checkbox"/>	Asian / Pacific Islander
<input type="checkbox"/>	Other

Please select an option or press skip button.

44/44. Do you have children under the age of 18 living at home?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

## Extended DISC Personal Analysis

**Read the instructions carefully before you begin**

Imagine describing yourself at work while completing the questionnaire.

Note! Answer quickly. The whole questionnaire should take 7-10 minutes.

Each of the following 24 questions contains four descriptive lines.

1. Begin by choosing the line that describes you most, and click the corresponding box in column M.
2. Then choose the line that describes you least and click the corresponding box in column L.
3. After that go to the next question by clicking button "Next".

Question 1/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Carefree, positive
<input type="checkbox"/>	<input type="checkbox"/>	Flexible, yielding
<input type="checkbox"/>	<input type="checkbox"/>	Argumentative, speaks out
<input type="checkbox"/>	<input type="checkbox"/>	Stable, relaxed

M = Describes you most

L = Describes you least

Question 2/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Optimistic, positive attitude to life
<input type="checkbox"/>	<input type="checkbox"/>	Adjustable, agreeable
<input type="checkbox"/>	<input type="checkbox"/>	Respectful, obedient
<input type="checkbox"/>	<input type="checkbox"/>	Shows initiative, wants change

M = Describes you most

L = Describes you least

Question 3/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Sociable, loves company
<input type="checkbox"/>	<input type="checkbox"/>	Consistent, balanced
<input type="checkbox"/>	<input type="checkbox"/>	Independent, own initiative
<input type="checkbox"/>	<input type="checkbox"/>	Listening, reserved

M = Describes you most

L = Describes you least

Question 4/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Well-meaning, pleasant
<input type="checkbox"/>	<input type="checkbox"/>	Careful, cautious
<input type="checkbox"/>	<input type="checkbox"/>	Decisive, not easily shaken
<input type="checkbox"/>	<input type="checkbox"/>	Convincing, inspiring

M = Describes you most

L = Describes you least

Question 5/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Kind, eager to help
<input type="checkbox"/>	<input type="checkbox"/>	Reserved, tends to keep to oneself
<input type="checkbox"/>	<input type="checkbox"/>	Seeks attention, admirable
<input type="checkbox"/>	<input type="checkbox"/>	Strong-willed, firm

M = Describes you most

L = Describes you least

Question 6/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Genial, makes friends easily
<input type="checkbox"/>	<input type="checkbox"/>	Restrained, holds back
<input type="checkbox"/>	<input type="checkbox"/>	Exact, precise
<input type="checkbox"/>	<input type="checkbox"/>	Straightforward, outspoken

M = Describes you most

L = Describes you least

Question 7/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Values information, specialist
<input type="checkbox"/>	<input type="checkbox"/>	Team oriented, fits into group
<input type="checkbox"/>	<input type="checkbox"/>	Temperamental, energetic
<input type="checkbox"/>	<input type="checkbox"/>	Easy-going, tolerant of others

M = Describes you most

L = Describes you least

Question 8/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Bold, strong-willed
<input type="checkbox"/>	<input type="checkbox"/>	Considerate, well-mannered
<input type="checkbox"/>	<input type="checkbox"/>	Contented, happy
<input type="checkbox"/>	<input type="checkbox"/>	Smooth-talking, good speaker

M = Describes you most

L = Describes you least

Question 9/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Avoid extremes, sensitive
<input type="checkbox"/>	<input type="checkbox"/>	Easily used, self-sacrificing
<input type="checkbox"/>	<input type="checkbox"/>	Center of the group, lively
<input type="checkbox"/>	<input type="checkbox"/>	Overbearing, aggressive

M = Describes you most

L = Describes you least

Question 10/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Inquiring, observant
<input type="checkbox"/>	<input type="checkbox"/>	Thoughtful, service-minded
<input type="checkbox"/>	<input type="checkbox"/>	Strong-willed, goal-oriented
<input type="checkbox"/>	<input type="checkbox"/>	Cheerful, good-tempered

M = Describes you most

L = Describes you least

Question 11/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Humble, a follower
<input type="checkbox"/>	<input type="checkbox"/>	Self-conscious, shy
<input type="checkbox"/>	<input type="checkbox"/>	Confident, bold
<input type="checkbox"/>	<input type="checkbox"/>	Eager, supportive

M = Describes you most

L = Describes you least

Question 12/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Assertive, straight-forward
<input type="checkbox"/>	<input type="checkbox"/>	Trusts people, good speaker
<input type="checkbox"/>	<input type="checkbox"/>	Understanding, sympathetic
<input type="checkbox"/>	<input type="checkbox"/>	Tolerant, accepting

M = Describes you most

L = Describes you least

Question 13/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Amusing, witty
<input type="checkbox"/>	<input type="checkbox"/>	Complying, punctual
<input type="checkbox"/>	<input type="checkbox"/>	Tough, brazen
<input type="checkbox"/>	<input type="checkbox"/>	Unruffled, calm

M = Describes you most

L = Describes you least

Question 14/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Disciplined, self-controlled
<input type="checkbox"/>	<input type="checkbox"/>	Lively, energetic
<input type="checkbox"/>	<input type="checkbox"/>	Ready to help, well-meaning
<input type="checkbox"/>	<input type="checkbox"/>	Doesn't give in, strong

M = Describes you most

L = Describes you least

Question 15/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Relies on and trusts in people
<input type="checkbox"/>	<input type="checkbox"/>	Peaceful, satisfied
<input type="checkbox"/>	<input type="checkbox"/>	Confident, leaves no room for doubt
<input type="checkbox"/>	<input type="checkbox"/>	Thorough, quiet

M = Describes you most

L = Describes you least

Question 16/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Wants to win, competitive
<input type="checkbox"/>	<input type="checkbox"/>	Sensitive, empathic
<input type="checkbox"/>	<input type="checkbox"/>	Sociable, likes company
<input type="checkbox"/>	<input type="checkbox"/>	Adaptable, compliant

M = Describes you most

L = Describes you least

Question 17/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Willing, helpful
<input type="checkbox"/>	<input type="checkbox"/>	Adjustable, adaptable
<input type="checkbox"/>	<input type="checkbox"/>	Enthusiastic, goes along
<input type="checkbox"/>	<input type="checkbox"/>	Imaginative, self-confident

M = Describes you most

L = Describes you least

Question 18/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Follower, obeys instructions
<input type="checkbox"/>	<input type="checkbox"/>	Daring, tough
<input type="checkbox"/>	<input type="checkbox"/>	Delightful, refreshing
<input type="checkbox"/>	<input type="checkbox"/>	Faithful, accountable

M = Describes you most

L = Describes you least

Question 19/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Risk-taker, confident
<input type="checkbox"/>	<input type="checkbox"/>	Friendly, open
<input type="checkbox"/>	<input type="checkbox"/>	Adjustable, flexible

<input type="checkbox"/>	<input type="checkbox"/>	Moderate, careful
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M = Describes you most

L = Describes you least

Question 20/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Chatty, extrovert
<input type="checkbox"/>	<input type="checkbox"/>	Restrained, moderate
<input type="checkbox"/>	<input type="checkbox"/>	Organized, follows tradition
<input type="checkbox"/>	<input type="checkbox"/>	Uncompromising, firm

M = Describes you most

L = Describes you least

Question 21/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Quick, seeks change
<input type="checkbox"/>	<input type="checkbox"/>	Reliable, predictable
<input type="checkbox"/>	<input type="checkbox"/>	Popular, generally liked
<input type="checkbox"/>	<input type="checkbox"/>	Well-organized, thorough

M = Describes you most

L = Describes you least

Question 22/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Persuasive, convincing
<input type="checkbox"/>	<input type="checkbox"/>	Reserved, silent
<input type="checkbox"/>	<input type="checkbox"/>	Gentle, kind
<input type="checkbox"/>	<input type="checkbox"/>	Individual, a "character"

M = Describes you most

L = Describes you least

Question 23/24

M	L	
<input type="checkbox"/>	<input type="checkbox"/>	Aligning, agreeable
<input type="checkbox"/>	<input type="checkbox"/>	Stubborn, unshakeable

<input type="checkbox"/>	<input type="checkbox"/>	Delightful, attractive
<input type="checkbox"/>	<input type="checkbox"/>	Arouses sympathy, sweet

M = Describes you most

L = Describes you least

Question 24/24

<b>M</b>	<b>L</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Sense of responsibility, obedient
<input type="checkbox"/>	<input type="checkbox"/>	Thoughtful, restrained
<input type="checkbox"/>	<input type="checkbox"/>	Fun-loving, unruly
<input type="checkbox"/>	<input type="checkbox"/>	Decisive, headstrong

M = Describes you most

L = Describes you least

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