

Professional Reputation & Relationship Management Worksheet

Professional Information

Name / Organization: _____

Primary Role(s): _____

Phone Number: _____

Email Address: _____

Website / Portfolio: _____

Primary Social Media: _____

Professional Relationship Tracking

Contact / Organization	Role / Industry Position	Relationship Status	Notes

Reliability & Follow-Through Review

Operational Review

Question	Completed
Deadlines consistently met	<input type="checkbox"/>
Communication responded to professionally	<input type="checkbox"/>

Financial obligations handled responsibly	<input type="checkbox"/>
Scheduling commitments honored	<input type="checkbox"/>
Technical preparation completed on time	<input type="checkbox"/>
Follow-up communication completed	<input type="checkbox"/>
Responsibilities documented clearly	<input type="checkbox"/>

Recent Operational Problems

- Missed deadlines
- Late arrivals
- Unanswered communication
- Scheduling conflicts
- Payment disputes
- Technical disorganization
- Public conflicts
- Incomplete responsibilities

Notes On Operational Issues

Public Communication Review

Social & Public Conduct Review

Question	Completed
Public communication remained professional	<input type="checkbox"/>
Emotional escalation avoided online	<input type="checkbox"/>
Conflicts handled factually	<input type="checkbox"/>
Public statements verified before posting	<input type="checkbox"/>
Professional relationships respected publicly	<input type="checkbox"/>
Online interactions aligned with professional goals	<input type="checkbox"/>

Public Communication Concerns

Conflict & Resolution Tracking

Conflict / Issue	Resolution Attempted	Outcome

Professional Presentation Review

Item	Completed
Contact information updated	<input type="checkbox"/>
Website functioning properly	<input type="checkbox"/>
Social media current	<input type="checkbox"/>
Professional bio updated	<input type="checkbox"/>
Portfolio / media links working	<input type="checkbox"/>
Branding visually consistent	<input type="checkbox"/>
Communication materials organized	<input type="checkbox"/>

Reputation Pattern Review

Positive Patterns Observed

Negative Patterns Requiring Attention

Self-Assessment

Question	Ye s	N o
Do people regularly rehire or recommend me?	<input type="checkbox"/>	<input type="checkbox"/>
Do I communicate clearly under pressure?	<input type="checkbox"/>	<input type="checkbox"/>
Do I resolve problems professionally?	<input type="checkbox"/>	<input type="checkbox"/>
Do I follow through consistently?	<input type="checkbox"/>	<input type="checkbox"/>
Do recurring operational problems appear repeatedly?	<input type="checkbox"/>	<input type="checkbox"/>
Do I escalate situations emotionally?	<input type="checkbox"/>	<input type="checkbox"/>
Do I maintain strong long-term relationships?	<input type="checkbox"/>	<input type="checkbox"/>

Long-Term Relationship Notes

Strong Professional Relationships Worth Maintaining

Relationships Requiring Repair Or Follow-Up

Future Collaboration Opportunities

Final Notes

