

Scorecard—Station 1 Responses

For each Team Effectiveness Factor on **pages 1–6**, select the **three survey items** you categorized for the factor. Select no more than three items per page. **Note:** You can clear the form using the button on the right, but this will **clear all forms** in the document. You will have to **redo** your selections.

Shared Purpose

Clear Form

Select the three items you identified for **Shared Purpose**.

1. My team likes to experiment and try new ways to solve problems.	2. My team members share relevant information openly and clearly.	3. My team effectively shares progress, gathers feedback, and approves work.
4. There is a high level of trust, comfort, and understanding on my team.	5. When working together, my team is capable of effectively resolving conflict.	6. My team's goals are aligned with the organization's.
7. My team members are respectful and understanding.	8. On my team, individual goals, responsibilities, and expected contributions are clear.	9. On my team, there is a good match between individuals' qualifications, capabilities, and motivation for assigned roles.
10. I understand why my team exists and what it's trying to accomplish.	11. My team works on assignments that challenge us to learn and grow.	12. My team prioritizes collective contribution over individual competition.
13. My team intentionally invites everyone's input and incorporates it in collective activities, such as brainstorming.	14. I feel like my teammates guide and coach me.	15. My team has sufficient time, staff, funding, and other resources to efficiently complete its work.
16. Team members know their boundaries when making decisions and assigning work.	17. My team has clear processes on how to plan, track, document, and manage work.	18. I understand the business impact of my team's work.

Clear Form

Role Clarity

Select the three items you identified for **Role Clarity**.

1. My team likes to experiment and try new ways to solve problems.	2. My team members share relevant information openly and clearly.	3. My team effectively shares progress, gathers feedback, and approves work.
4. There is a high level of trust, comfort, and understanding on my team.	5. When working together, my team is capable of effectively resolving conflict.	6. My team's goals are aligned with the organization's.
7. My team members are respectful and understanding.	8. On my team, individual goals, responsibilities, and expected contributions are clear.	9. On my team, there is a good match between individuals' qualifications, capabilities, and motivation for assigned roles.
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Clear Form

Enabling Processes

Select the three items you identified for **Enabling Processes**.

1. My team likes to experiment and try new ways to solve problems.	2. My team members share relevant information openly and clearly.	3. My team effectively shares progress, gathers feedback, and approves work.
4. There is a high level of trust, comfort, and understanding on my team.	5. When working together, my team is capable of effectively resolving conflict.	6. My team's goals are aligned with the organization's.
7. My team members are respectful and understanding.	8. On my team, individual goals, responsibilities, and expected contributions are clear.	9. On my team, there is a good match between individuals' qualifications, capabilities, and motivation for assigned roles.
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Clear Form

Emotional Security

Select the three items you identified for **Emotional Security**.

1. My team likes to experiment and try new ways to solve problems.	2. My team members share relevant information openly and clearly.	3. My team effectively shares progress, gathers feedback, and approves work.
4. There is a high level of trust, comfort, and understanding on my team.	5. When working together, my team is capable of effectively resolving conflict.	6. My team's goals are aligned with the organization's.
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Collaborative Spirit

Clear Form

Select the three items you identified for **Collaborative Spirit**.

1. My team likes to experiment and try new ways to solve problems.	2. My team members share relevant information openly and clearly.	3. My team effectively shares progress, gathers feedback, and approves work.
4. There is a high level of trust, comfort, and understanding on my team.	5. When working together, my team is capable of effectively resolving conflict.	6. My team's goals are aligned with the organization's.
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Clear Form

Growth Orientation

Select the three items you identified for **Growth Orientation**.

1. My team likes to experiment and try new ways to solve problems.	2. My team members share relevant information openly and clearly.	3. My team effectively shares progress, gathers feedback, and approves work.
4. There is a high level of trust, comfort, and understanding on my team.	5. When working together, my team is capable of effectively resolving conflict.	6. My team's goals are aligned with the organization's.
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This box will populate your score once you have selected all your survey items. Please don't attempt to edit or adjust this score.

Score for Station 1

Clear Form

Scorecard—Station 2 Responses

Select the appropriate items below to record the top **three symptoms** your team agreed on for the “Time to Innovate” team. Select no more than three items. If you need to clear the form, use the Clear Form button on the right.

Practical Needs	Personal Needs
<p>Shared Purpose Symptoms</p> <ol style="list-style-type: none"> 1. Ambiguous team mission 2. Unclear team objectives 3. Misalignment between team and organizational goals 4. Unclear understanding of team impact 	<p>Emotional Security Symptoms</p> <ol style="list-style-type: none"> 14. Lack of empathy or understanding 15. Excluding others 16. Disruptive team members 17. Ignoring input 18. Lack of trust
<p>Role Clarity Symptoms</p> <ol style="list-style-type: none"> 5. Poorly defined roles and objectives 6. Person–role mismatch 7. Unclear decision-making boundaries 	<p>Collaborative Spirit Symptoms</p> <ol style="list-style-type: none"> 19. Lack of interdependency 20. Repeated and unresolved conflict 21. Emphasis on individual success 22. Poor communication
<p>Enabling Processes Symptoms</p> <ol style="list-style-type: none"> 8. Insufficient resources 9. Lack of workflow management 10. Poor meeting practices 11. Limited access to information 12. Unclear review and approval process 13. Lack of feedback on team experience 	<p>Growth Orientation Symptoms</p> <ol style="list-style-type: none"> 23. Lack of coaching or mentorship 24. Overreliance on proven methods 25. Lack of proactive knowledge sharing 26. Lack of growth opportunities

This box will populate your score once you have selected the symptoms. Please don't attempt to edit or adjust this score.

Score for Station 2

Scorecard—Station 3 Responses

Select the appropriate rating under each factor to represent your assessment of the "Innovation Fund" team's performance. Select one rating for each factor.

Practical Needs	Personal Needs
<p>Shared Purpose</p> <p>Poor</p> <p>Moderate</p> <p>Strong</p>	<p>Emotional Security</p> <p>Poor</p> <p>Moderate</p> <p>Strong</p>
<p>Role Clarity</p> <p>Poor</p> <p>Moderate</p> <p>Strong</p>	<p>Collaborative Spirit</p> <p>Poor</p> <p>Moderate</p> <p>Strong</p>
<p>Enabling Processes</p> <p>Poor</p> <p>Moderate</p> <p>Strong</p>	<p>Growth Orientation</p> <p>Poor</p> <p>Moderate</p> <p>Strong</p>

This box will populate your score once you have selected your ratings. Please don't attempt to edit or adjust this score.

Score for Station 3