

Name:

YOUTH TRANSITION SURVEY

Please use the following scale to rate the **FREQUENCY** of each item:

1 = Never

3 = Often

5 = Not Applicable

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Education & Vocation

Goal: I know what job I want and what I need to do to prepare for that job.

• I know and can identify what areas interest me for future employment.	1	2	3	4	5
• I meet with my school counselor, vocational rehabilitation, or disability specialist to discuss potential jobs.	1	2	3	4	5
• I interview people in jobs that interest me.	1	2	3	4	5
• I shadow someone who has a job that interests me.	1	2	3	4	5
• I volunteer to work at places that interest me.	1	2	3	4	5
• I talk with medical professionals, P/T, O/T, and Peer Mentors to establish business contacts.	1	2	3	4	5
Skills					
• I study efficiently and effectively.	1	2	3	4	5
• I organize myself efficiently and effectively.	1	2	3	4	5
• I have good communication skills.	1	2	3	4	5
• I interview effectively.	1	2	3	4	5
• I am reliable.	1	2	3	4	5
• I update my resume.	1	2	3	4	5
• I obtain a letter of reference.	1	2	3	4	5
• I obtain and keep a job.	1	2	3	4	5
• I attend local workshops and take advantage of on-the-job training.	1	2	3	4	5
Time Management					
• I sign up for my own classes and schedule my own appointments.	1	2	3	4	5
• I schedule and am on time for appointments.	1	2	3	4	5
• I use a calendar, Day Timer, or PDA to keep track of my appointments.	1	2	3	4	5
• I prepare myself in advance for meetings (clothes, materials, and transportation).	1	2	3	4	5
• I am aware of the time factor in the scheduling and participation in meetings.	1	2	3	4	5
• I flaunt my successes and minimize my weaknesses.	1	2	3	4	5
• I decide on timelines for the completion of short- and long-term goals.	1	2	3	4	5
Knowledge					
• I complete a skill assessment test to identify my strengths and weaknesses.	1	2	3	4	5
• I identify skills necessary in careers that interest me.	1	2	3	4	5
• I identify areas of interest that might relate to a job.	1	2	3	4	5

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• I know my rights.	1	2	3	4	5
• I take advantage of any services (government or private) that may assist me in obtaining a job.	1	2	3	4	5
IEP					
• I conduct my own Student-Led IEP, including my career goals and transition services.	1	2	3	4	5
• I identify my own strengths and weaknesses.	1	2	3	4	5
• I identify necessary changes/updates to my IEP.	1	2	3	4	5
• I identify future short- and long-term goals.	1	2	3	4	5
• I identify plans to achieve my goals.	1	2	3	4	5
• I discuss my goals/plans with my parent/guardian.	1	2	3	4	5
• I work with my Case Manager to develop my IEP.	1	2	3	4	5
• I read my completed IEP.	1	2	3	4	5
• I ask for explanations about concerns, questions regarding the items in my IEP.	1	2	3	4	5
• I work with my IEP team to add or alter goals and benchmarks.	1	2	3	4	5
• I participate in 504 meetings.	1	2	3	4	5

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Health Management

Goal: I take responsibility for my personal health care.

Self-Determination					
• I take responsibility for my own personal hygiene.	1	2	3	4	5
• I take responsibility for proper nutrition.	1	2	3	4	5
• I plan balanced meals that meet my individual needs.	1	2	3	4	5
• I plan meals based on how many calories it takes for me to maintain a healthy body weight.	1	2	3	4	5
• I take responsibility for my special health care needs.	1	2	3	4	5
• I take charge of my own therapy plan.	1	2	3	4	5
• I understand what it takes for me to maintain and sustain periods of wellness.	1	2	3	4	5
• I communicate effectively specific procedures, issues, and needs.	1	2	3	4	5
• I perform procedures specific to my personal health maintenance.	1	2	3	4	5
Time Management					
• I schedule my own doctor's appointments.	1	2	3	4	5
• I use a calendar, Day Timer, or PDA to keep track of my schedule and appointments.	1	2	3	4	5
• I create and keep a schedule.	1	2	3	4	5
• I schedule timely transportation.	1	2	3	4	5
• I know how long certain activities take and make arrangements for transportation accordingly.	1	2	3	4	5
• I arrange activities with time in mind.	1	2	3	4	5
• I practice being on time.	1	2	3	4	5
Knowledge					
• I plan healthy, balanced meals.	1	2	3	4	5
• I articulate my special dietary needs, supplies, and procedures.	1	2	3	4	5
• I utilize a dietician through my health care plan.	1	2	3	4	5
• I locate and maintain my medical records.	1	2	3	4	5
• I understand my diagnosis/disability.	1	2	3	4	5
• I can explain my baseline health status and identify issues differing from my baseline status.	1	2	3	4	5
• I identify and describe issues related to my health.	1	2	3	4	5
• I respond to questions from health care providers.	1	2	3	4	5
• I know and use emergency telephone numbers.	1	2	3	4	5
• I contact my health care provider.	1	2	3	4	5
• I change providers if necessary.	1	2	3	4	5
• I use my medical coverage numbers.	1	2	3	4	5
• I fill out medical forms.	1	2	3	4	5
• I understand my medications and dosages.	1	2	3	4	5
• I understand the side effects.	1	2	3	4	5

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• I do what it takes to stay healthy.	1	2	3	4	5
• I recognize the consequences of risky behavior.	1	2	3	4	5
• I understand the consequences of alcohol and drug abuse.	1	2	3	4	5
• I obtain sex education materials and can explore those options if appropriate.	1	2	3	4	5
• I receive genetic counseling if appropriate.	1	2	3	4	5
• I exercise regularly.	1	2	3	4	5
• I understand my options related to exercise: health clubs, fitness centers, adaptive recreation, personal activities, etc.	1	2	3	4	5
• I understand my health care coverage and benefit requirements for referrals, prescriptions, etc.	1	2	3	4	5
• I understand the length of my coverage in my family's insurance policy.	1	2	3	4	5
• I compare my family's health insurance coverage with Medicaid coverage (ALTCS).	1	2	3	4	5
• I explore my options related to my coverage under my health care plan.	1	2	3	4	5
• I update my Medical Power of Attorney.	1	2	3	4	5
• I understand my rights under the Family Medical Leave Act (FMLA).	1	2	3	4	5

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Social Relationships & Communications

Goal: I possess appropriate social skills.

Social Skills	1	2	3	4	5
• I make time for fun.	1	2	3	4	5
• I make eye contact with people.	1	2	3	4	5
• I smile at people when appropriate.	1	2	3	4	5
• I practice good posture.	1	2	3	4	5
• I pay attention when people are talking to me.	1	2	3	4	5
• I speak politely and appropriately.	1	2	3	4	5
• I join in conversations and stick to the subject matter.	1	2	3	4	5
• I initiate conversations with others.	1	2	3	4	5
• I am a good listener.	1	2	3	4	5
• I read other people's body language.	1	2	3	4	5
• I know what it means to be a friend.	1	2	3	4	5
• I invite friends over to my house.	1	2	3	4	5
• I am interested in the lives of my friends.	1	2	3	4	5
• I maintain long-term friendships.	1	2	3	4	5
• I plan parties or social events.	1	2	3	4	5
• I know what recreational activities are available in my community.	1	2	3	4	5
Personal Skills and Communication	1	2	3	4	5
• I have expectations of myself and others.	1	2	3	4	5
• I promote myself.	1	2	3	4	5
• I take responsibility for the consequences of my own actions.	1	2	3	4	5
• I communicate my needs or desires.	1	2	3	4	5
• I express and defend my own opinions.	1	2	3	4	5
• I know when and how to ask for help.	1	2	3	4	5
• I understand the benefits of being a team player.	1	2	3	4	5
• I identify and express my personal feelings.	1	2	3	4	5
• I understand my disability and am able to explain it to someone if he/she asks.	1	2	3	4	5
• I know the importance of taking good care of myself: physically, and emotionally.	1	2	3	4	5
• I experiment with different social situations.	1	2	3	4	5
• I volunteer in my community.	1	2	3	4	5
• I participate in school clubs, government, and after-school activities.	1	2	3	4	5
• I plan activities with others and arrange my own transportation.	1	2	3	4	5
• I create and explore opportunities for socialization.	1	2	3	4	5
• I travel.	1	2	3	4	5

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Independent Living

Goal: I develop skills for independent living

• I feel comfortable making my own decisions.	1	2	3	4	5
• I make healthy choices and decisions.	1	2	3	4	5
• I demonstrate personal responsibility: chores, school, personal care, job, etc.	1	2	3	4	5
• I use my own house key to gain safe access to/from the house.	1	2	3	4	5
• I utilize housing supports available to people with disabilities.	1	2	3	4	5
• I know what living options are available to me.	1	2	3	4	5
• I understand supported apartment or home living options.	1	2	3	4	5
• I familiarize myself with laws regarding accessible living.	1	2	3	4	5
• I take responsibility for the signing of a lease.	1	2	3	4	5
• I fill out applications and reference sheets for an apartment.	1	2	3	4	5
• I obtain household services: water, electric, phone, cable, etc.	1	2	3	4	5
• I take responsibility for having my own apartment or house.	1	2	3	4	5
Your Own Place					
• I determine what I will need: furniture, kitchen and bath items, laundry, etc.	1	2	3	4	5
• I select appropriate roommates.	1	2	3	4	5
• I hire, manage, and fire personal care attendants.	1	2	3	4	5
• I handle myself appropriately in emergency situations.	1	2	3	4	5
• I use emergency supplies.	1	2	3	4	5
• I use a cell phone.	1	2	3	4	5
• I communicate concerns effectively with my attendant, roommate, and physician.	1	2	3	4	5
• I communicate via a personal computer, e-mail, TTY, etc.	1	2	3	4	5
• I use household tools and appliances appropriately.	1	2	3	4	5
• I modify and adapt my home/apartment to meet my needs.	1	2	3	4	5
• I do my own laundry and put my clothes away.	1	2	3	4	5
• I shop, select, and make my own purchases: groceries, clothing, etc.	1	2	3	4	5
• I cook healthy meals.	1	2	3	4	5
• I follow a recipe.	1	2	3	4	5
• I acquire a service animal, if needed.	1	2	3	4	5

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Money Management & Budget

Goal: I take responsibility for my own finances.

Basic Knowledge					
• I use the basic units of money effectively.	1	2	3	4	5
• I count out money to pay for a purchase.	1	2	3	4	5
• I make and identify correct change.	1	2	3	4	5
• I make purchases.	1	2	3	4	5
• I comfortably handle money.	1	2	3	4	5
Budget					
• I keep a spending diary.	1	2	3	4	5
• I write down all of my monthly expenses: amounts and due dates.	1	2	3	4	5
• I write down how much money I actually spend each month.	1	2	3	4	5
• I know when my income does not cover my expenses.	1	2	3	4	5
• I know how to cut back on expenses to fit within a budget.	1	2	3	4	5
• I work up a monthly budget.	1	2	3	4	5
Banking					
• I use my social security number.	1	2	3	4	5
• I use a photo I.D. (Driver's License or State I.D.).	1	2	3	4	5
• I fill out bank forms.	1	2	3	4	5
• I set up a savings account.	1	2	3	4	5
• I manage my checking account.	1	2	3	4	5
• I know and use my account numbers.	1	2	3	4	5
• I feel comfortable writing checks.	1	2	3	4	5
• I balance my checking account.	1	2	3	4	5
• I apply for credit and/or debit cards.	1	2	3	4	5
• I use credit and/or debit cards safely and smartly.	1	2	3	4	5
• I understand how each works.	1	2	3	4	5
• I utilize on-line banking services.	1	2	3	4	5
Social Security					
• I apply for benefits.	1	2	3	4	5
• I take advantage of a savings plan with social security.	1	2	3	4	5
• I report to social security at the appropriate times.	1	2	3	4	5
Miscellaneous					
• I file all of my important papers in an organized manner.	1	2	3	4	5

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Personal Appearance & Hygiene

Goal: I take responsibility for my own appearance and hygiene.

Personal Appearance					
• I explain my personal hygiene needs to a support person.	1	2	3	4	5
• I wash and comb my hair.	1	2	3	4	5
• I brush my teeth.	1	2	3	4	5
• I keep my face and body clean.	1	2	3	4	5
• I keep my skin clean.	1	2	3	4	5
• I regularly look for pressure sores.	1	2	3	4	5
• I keep my finger and toe nails clean and trimmed.	1	2	3	4	5
• I am attentive to possible body odors.	1	2	3	4	5
Style					
• I know the current styles and trends.	1	2	3	4	5
• I know what styles look good on me.	1	2	3	4	5
• I pick out my own clothes.	1	2	3	4	5

Orientation & Mobility

Goal: Youth takes responsibility his/her own safe orientation and mobility.

Transportation					
• I use multiple resources (car, bus, Dial A Ride, etc.) to get around the community.	1	2	3	4	5
• I use these resources effectively.	1	2	3	4	5
• I know what steps I need to take to drive.	1	2	3	4	5
• I use public transportation.	1	2	3	4	5
Orientation					
• I safely cross the street.	1	2	3	4	5
• I safely use various modes of transportation.	1	2	3	4	5
Mobility					
• I maintain my wheelchair equipment.	1	2	3	4	5
• I attend seminars on how to maintain my equipment.	1	2	3	4	5