

Name: _____

YOUTH TRANSITION SURVEY

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

1 = Never

3 = Often

5 = Not Applicable

2 = Sometimes

4 = Always

Education & Vocation

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

General

1. I know and can identify what areas interest me for future employment. _____
2. I meet with my school counselor, vocational rehabilitation, or disability specialist to discuss potential jobs. _____
3. I interview people in jobs that interest me. _____
4. I shadow someone who has a job that interests me. _____
5. I volunteer to work at places that interest me. _____
6. I talk with medical professionals, P/T, O/T, and Peer Mentors to establish business contacts. _____

Skills

7. I study efficiently and effectively. _____
8. I organize myself efficiently and effectively. _____
9. I have good communication skills. _____
10. I interview effectively. _____
11. I am reliable. _____
12. I update my resume. _____
13. I obtain a letter of reference. _____
14. I obtain and keep a job. _____
15. I attend local workshops and take advantage of on-the-job training. _____

Time Management

16. I sign up for my own classes and schedule my own appointments. _____
17. I schedule and am on time for appointments. _____
18. I use a calendar, Day Timer, or PDA to keep track of my appointments. _____
19. I prepare myself in advance for meetings (clothes, materials, and transportation). _____
20. I am aware of the time factor in the scheduling and participation in meetings. _____
21. I flaunt my successes and minimize my weaknesses. _____
22. I decide on timelines for the completion of short- and long-term goals. _____

Knowledge

23. I complete a skill assessment test to identify my strengths and weaknesses. _____
24. I identify skills necessary in careers that interest me. _____
25. I identify areas of interest that might relate to a job. _____
26. I know my rights. _____

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27. I take advantage of any services (government or private) that may assist me in obtaining a job. _____

IEP

28. I conduct my own Student-Led IEP, including my career goals and transition services. _____

29. I identify my own strengths and weaknesses. _____

30. I identify necessary changes/updates to my IEP. _____

31. I identify future short- and long-term goals. _____

32. I identify plans to achieve my goals. _____

33. I discuss my goals/plans with my parent/guardian. _____

34. I work with my Case Manager to develop my IEP. _____

35. I read my completed IEP. _____

36. I ask for explanations about concerns, questions regarding the items in my IEP. _____

37. I work with my IEP team to add or alter goals and benchmarks. _____

38. I participate in 504 meetings. _____

Health Management

Goal: I take responsibility for my personal health care.

Self-Determination

39. I take responsibility for my own personal hygiene. _____

40. I take responsibility for proper nutrition. _____

41. I plan balanced meals that meet my individual needs. _____

42. I plan meals based on how many calories it takes for me to maintain a healthy body weight. _____

43. I take responsibility for my special health care needs. _____

44. I take charge of my own therapy plan. _____

45. I understand what it takes for me to maintain and sustain periods of wellness. _____

46. I communicate effectively specific procedures, issues, and needs. _____

47. I perform procedures specific to my personal health maintenance. _____

Time Management

48. I schedule my own doctor's appointments. _____

49. I use a calendar, Day Timer, or PDA to keep track of my schedule and appointments. _____

50. I create and keep a schedule. _____

51. I schedule timely transportation. _____

52. I know how long certain activities take and make arrangements for transportation accordingly. _____

53. I arrange activities with time in mind. _____

54. I practice being on time. _____

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Knowledge

- 55. I plan healthy, balanced meals. _____
- 56. I articulate my special dietary needs, supplies, and procedures. _____
- 57. I utilize a dietician through my health care plan. _____
- 58. I locate and maintain my medical records. _____
- 59. I understand my diagnosis/disability. _____
- 60. I can explain my baseline health status and identify issues differing from my baseline status. _____
- 61. I identify and describe issues related to my health. _____
- 62. I respond to questions from health care providers. _____
- 63. I know and use emergency telephone numbers. _____
- 64. I contact my health care provider. _____
- 65. I change providers if necessary. _____
- 66. I use my medical coverage numbers. _____
- 67. I fill out medical forms. _____
- 68. I understand my medications and dosages. _____
- 69. I understand the side effects. _____
- 70. I do what it takes to stay healthy. _____
- 71. I recognize the consequences of risky behavior. _____
- 72. I understand the consequences of alcohol and drug abuse. _____
- 73. I obtain sex education materials and can explore those options if appropriate. _____
- 74. I receive genetic counseling if appropriate. _____
- 75. I exercise regularly. _____
- 76. I understand my options related to exercise: health clubs, fitness centers, adaptive recreation, personal activities, etc. _____
- 77. I understand my health care coverage and benefit requirements for referrals, prescriptions, etc. _____
- 78. I understand the length of my coverage in my family's insurance policy. _____
- 79. I compare my family's health insurance coverage with Medicaid coverage (ALTCS). _____
- 80. I explore my options related to my coverage under my health care plan. _____
- 81. I update my Medical Power of Attorney. _____
- 82. I understand my rights under the Family Medical Leave Act (FMLA). _____

Social Relationships & Communications

Goal: I possess appropriate social skills.

Social Skills

- 83. I make time for fun. _____
- 84. I make eye contact with people. _____
- 85. I smile at people when appropriate. _____
- 86. I practice good posture. _____

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- 87. I pay attention when people are talking to me. _____
- 88. I speak politely and appropriately. _____
- 89. I join in conversations and stick to the subject matter. _____
- 90. I initiate conversations with others. _____
- 91. I am a good listener. _____
- 92. I read other people's body language. _____
- 93. I know what it means to be a friend. _____
- 94. I invite friends over to my house. _____
- 95. I am interested in the lives of my friends. _____
- 96. I maintain long-term friendships. _____
- 97. I plan parties or social events. _____
- 98. I know what recreational activities are available in my community. _____

Personal Skills and Communication

- 99. I have expectations of myself and others. _____
- 100. I promote myself. _____
- 101. I take responsibility for the consequences of my own actions. _____
- 102. I communicate my needs or desires. _____
- 103. I express and defend my own opinions. _____
- 104. I know when and how to ask for help. _____
- 105. I understand the benefits of being a team player. _____
- 106. I identify and express my personal feelings. _____
- 107. I understand my disability and am able to explain it to someone if he/she asks. _____
- 108. I know the importance of taking good care of myself: physically, and emotionally. _____
- 109. I experiment with different social situations. _____
- 110. I volunteer in my community. _____
- 111. I participate in school clubs, government, and after-school activities. _____
- 112. I plan activities with others and arrange my own transportation. _____
- 113. I create and explore opportunities for socialization. _____
- 114. I travel. _____

Independent Living

Goal: I develop skills for independent living

General

- 115. I feel comfortable making my own decisions. _____
- 116. I make healthy choices and decisions. _____
- 117. I demonstrate personal responsibility: chores, school, personal care, job, etc. _____
- 118. I use my own house key to gain safe access to/from the house. _____
- 119. I utilize housing supports available to people with disabilities. _____
- 120. I know what living options are available to me. _____
- 121. I understand supported apartment or home living options. _____

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122. I familiarize myself with laws regarding accessible living. _____
123. I take responsibility for the signing of a lease. _____
124. I fill out applications and reference sheets for an apartment. _____
125. I obtain household services: water, electric, phone, cable, etc. _____
126. I take responsibility for having my own apartment or house. _____

Your Own Place

127. I determine what I will need: furniture, kitchen and bath items, laundry, etc. _____
128. I select appropriate roommates. _____
129. I hire, manage, and fire personal care attendants. _____
130. I handle myself appropriately in emergency situations. _____
131. I use emergency supplies. _____
132. I use a cell phone. _____
133. I communicate concerns effectively with my attendant, roommate, and physician. _____
134. I communicate via a personal computer, e-mail, TTY, etc. _____
135. I use household tools and appliances appropriately. _____
136. I modify and adapt my home/apartment to meet my needs. _____
137. I do my own laundry and put my clothes away. _____
138. I shop, select, and make my own purchases: groceries, clothing, etc. _____
139. I cook healthy meals. _____
140. I follow a recipe. _____
141. I acquire a service animal, if needed. _____

Money Management & Budget

Goal: I take responsibility for my own finances.

Basic Knowledge

142. I use the basic units of money effectively. _____
143. I count out money to pay for a purchase. _____
144. I make and identify correct change. _____
145. I make purchases. _____
146. I comfortably handle money. _____

Budget

147. I keep a spending diary. _____
148. I write down all of my monthly expenses: amounts and due dates. _____
149. I write down how much money I actually spend each month. _____
150. I know when my income does not cover my expenses. _____
151. I know how to cut back on expenses to fit within a budget. _____
152. I work up a monthly budget. _____

Banking

153. I use my social security number. _____

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- 154. I use a photo I.D. (Driver's License or State I.D.). _____
- 155. I fill out bank forms. _____
- 156. I set up a savings account. _____
- 157. I manage my checking account. _____
- 158. I know and use my account numbers. _____
- 159. I feel comfortable writing checks. _____
- 160. I balance my checking account. _____
- 161. I apply for credit and/or debit cards. _____
- 162. I use credit and/or debit cards safely and smartly. _____
- 163. I understand how each works. _____
- 164. I utilize on-line banking services. _____

Social Security

- 165. I apply for benefits. _____
- 166. I take advantage of a savings plan with social security. _____
- 167. I report to social security at the appropriate times. _____

Miscellaneous

- 168. I file all of my important papers in an organized manner. _____

Personal Appearance & Hygiene

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

Personal Appearance

- 169. I explain my personal hygiene needs to a support person. _____
- 170. I wash and comb my hair. _____
- 171. I brush my teeth. _____
- 172. I keep my face and body clean. _____
- 173. I keep my skin clean. _____
- 174. I regularly look for pressure sores. _____
- 175. I keep my finger and toe nails clean and trimmed. _____
- 176. I am attentive to possible body odors. _____

Style

- 177. I know the current styles and trends. _____
- 178. I know what styles look good on me. _____
- 179. I pick out my own clothes. _____

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Orientation & Mobility

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

Transportation

180. I use multiple resources (car, bus, Dial A Ride, etc.) to get around the community. _____

181. I use these resources effectively. _____

182. I know what steps I need to take to drive. _____

183. I use public transportation. _____

Orientation

184. I safely cross the street. _____

185. I safely use various modes of transportation. _____

Mobility

186. I maintain my wheelchair equipment. _____

187. I attend seminars on how to maintain my equipment. _____