Parent Transition Survey

Student Name: __________________________ Date _______ Age of Child: _______

Public School Education

1. Type of disability that qualifies your son/daughter for special education
   □ Autism
   □ Autism Spectrum Disorder (ASD)
   □ Traumatic Brain Injury
   □ Specific Learning Disability
   □ Intellectual Disability
   □ Emotional Disability
   □ Deaf-Blind
   □ Blind/Visually Impaired
   □ Other Health Impairments
   □ Deaf/Hard of Hearing
   □ Multiple Disabilities
   □ Speech or Language Impairment
   □ Orthopedic Impairment
   □ Other: ____________

2. Do you anticipate your child receiving a standard high school diploma?  □ YES  □ NO

3. At what age do you anticipate or plan for your son/daughter to exit public school?
   □ age 17  □ age 18
   □ age 19  □ age 20
   □ age 21  □ age 22
   □ age 23
   □ other: age __________

4. In what area does your child have the greatest needs?  
   (Check all that apply. Of those checked, please rank the top 5 areas. Rank: 1 most important → 5 least important.)

   Ex:  □ 1. Example (most important, #1)
   □ Academic skills needed for postsecondary education
   □ Basic academic skills (reading, writing, arithmetic)
   □ Household chores (cleaning, laundry, etc.)
   □ Community safety
   □ Communication skills (ability to express oneself to others)
   □ Substance Abuse education
   □ Decision making/ goal setting/problem-solving skills
   □ Friendships and social relationships
   □ Meal planning, preparation, & cleaning up
   □ Money management skills
   □ Personal care needs (grooming, shaving, dressing skills etc.)
   □ Disability knowledge/self-advocacy
   □ Recreational/leisure skills
   □ Safe sexual behavior and sexual health education
   □ Shopping skills (comparison shopping, handling money, etc.)
   □ Assistive technology
   □ Travel skills (pedestrian, public &/or private transportation)
   □ Vocational and career exploration (opportunities to experience and learn about several different types of careers and/or jobs
   □ Health care management
   □ Toiling
   □ Other: ____________________________
Future Post-Secondary Education / Training / Lifelong Learning

5. Future education goals for my son/daughter will be:
   □ Four year college/University
   □ Community College
   □ Vocational technical school
   □ On-the-job training
   □ Adult-continuing education/Community sponsored classes
   □ Job Corps
   □ Don’t know
   □ Other: ___________________________________________

Employment and Career Training

6. I think my son/daughter will work in:
   □ Full-time competitive employment (find and keep a job on his/her own w/o support)
   □ Part-time competitive employment
   □ Supported employment (community job for real wages with supports to find and keep a job)
   □ Military service
   □ Adult Day Services
   □ Volunteer work
   □ Don’t know
   □ I do not expect my son/daughter to work
   □ Other (please specify) ___________________________________________

7. What type of work does your son/daughter state that he/she is interested in?
   ___________________________________________

8. Do you feel this is a realistic goal? □ YES □ NO

9. What type of employment do you think he/she would enjoy?
   ___________________________________________

10. What type of support or assistance do you think your son/daughter will need in finding and maintaining a job? (Check all that apply.)
    □ Will not need any support
    □ Help locating job opportunities
    □ Assistance with application and interview
    □ Assistance only when problems or new situations arise
    □ Time-limited support to learn the job (extra training)
    □ Long-term support needed to learn the job (ongoing training)
    □ Ongoing support to perform the job (personal care attendant, etc.)
Future Independent Living Options

11. Five years after school, where do you want your son/daughter to live?
   □ At home
   □ With family – other than parents
   □ In an apartment on their own – alone or with roommate(s) (circle one)
   □ In a supported apartment/living program – alone or with roommate(s)
   □ In a group home
   □ In a foster home
   □ In subsidized housing
   □ Other: __________________________

12. Concerns that you have about your son/daughter living on his/her own:
   □ Can’t shop independently
   □ Can’t manage money
   □ Health related concerns
   □ Has been too dependent
   □ Won’t take good care of self (eating, hygiene, etc)
   □ Will be lonely
   □ Will be exploited (sexual, physical, financial)
   □ Other: __________________________

Guardianship / Financial Supports / Trusts

13. After graduation/school completion, how do you want your son/daughter to be supported? (check all that apply):
   □ Social Security/ SSI/ SSDI
   □ His/her own wages
   □ Wages and Social Security
   □ Wages and Government Benefits
   □ Government Benefits (food stamps, subsidized housing, etc.)
   □ Your financial support
   □ I don’t know

14. Do you think that when your son/daughter turns 18 years old, he/she will:
   □ Be his or her own legal guardian
   □ Need a guardian/conservator for financial decisions
   □ Need a guardian/conservator for medical decisions
   □ Need an advocate or personal representative
   □ Need a medical proxy
   □ Need Power of Attorney
   □ Need a legal guardian appointed
   □ Not sure/don’t know

15. Have you prepared (trust fund/special needs trust) for the future support for your son/daughter? □ YES   □ NO

16. Have you prepared a will that includes plans for your son/daughter? □ YES   □ NO
17. Do you think your son/daughter will get a driver’s license? □ YES □ NO

18. After graduation/school completion, will your son/daughter travel around town by:
   □ ___ Bicycle
   □ ___ Walk
   □ ___ Public Transportation – (bus, commuter rail, etc.)
   □ ___ His/her own car
   □ ___ City cab
   □ ___ Get rides in the family car or with friends
   □ ___ Other: ______________________________

Recreation and Leisure

19. When my son/daughter graduates/completes school, I hope he/she will be involved in:
   (check all that apply):
      □ Recreational activities that he/she does alone
      □ Activities with friends
      □ Friends with disabilities
      □ Friends without disabilities
      □ Organized recreational activities (clubs, team sports)
      □ Integrated activities (team members with and without disabilities)
      □ Classes (to develop hobbies, and explore areas of interest)
      □ Other: ______________________________

20. After graduation/school completion, do you feel your son/daughter will probably:
   (check all that apply)
      □ Get married
      □ Have a boy/girlfriend, but no marriage
      □ Have a committed relationship/life partner
      □ Have children
      □ Have very little romantic or social contact with a boy/girlfriend
21. Please check the following adult services that you either **aware of, involved with, or need more information** about:

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<tr>
<th>AGENCY</th>
<th>Aware Of</th>
<th>Involved With</th>
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<td>Vocational/Employment Rehabilitation Services</td>
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<td>Department of Disabilities Services (DDS)</td>
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<td>Health Care and/or Health Insurance</td>
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<td>Adult Social Security Benefits</td>
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<td>Working and Collecting Social Security Benefits – Programs Offered</td>
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<td>Centers for Independent Living</td>
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<td>Post Secondary Options for Adults with Disabilities</td>
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<td>Visiting Nurses Association</td>
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<td>Community Employment Resources</td>
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<td>Government Assistance (food stamps, subsidized housing, etc.)</td>
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<td>Attorney or Planning Services for Guardianship/Conservatorship/Power of Attorney</td>
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<td>Attorney or Planning Services for Financial Options for Your Child - wills, trusts, etc.</td>
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<td>Transportation Services</td>
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<td>Community Recreation Options</td>
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<td>Parent/Family Support</td>
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<td>Mental Health Services</td>
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<td>Services for the Deaf and Hard of Hearing</td>
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**Comments/Questions/Concerns:**

22. Please let us know other transition related concerns you may have as your child moves from public education to adult services.

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Thank you for completing this survey. **We look forward to assisting you and your child seamlessly transition from public school to adult services.**