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Project SEARCH Parent Transition Survey

Student's Name: _____

Parent's Name: _____

Date: _____

Please answer the following questions regarding your short term and long term transition goals for your young adult child. This will help us to know you and your child's plans for the future and give us information to help you with transition planning. Once completed, return this form to your child's special education teacher so they can add it to your child's Project SEARCH Application packet.

****This form must be completed by parents/guardian and returned to complete the application process****

I. EMPLOYMENT

A. What are your son/daughter's future employment plans?

- _____ full-time employment
- _____ part-time employment
- _____ supported employment
- _____ sheltered workshop
- _____ don't know
- _____ other: _____

B. What are your son's/daughter's job interests?

C. What are you son's daughter's job skills?

D. 1. What would you see as an ideal job for your son/daughter after graduation?

2. What skills does he/she have to do this job?

3. What skills would he/she need to learn?

4. Are there job opportunities for this type of work?

E. What other type of occupation would be best for your son/daughter that would best meet the needs, abilities, and interests of your child? (please specify type of work)

Which skills does your son/daughter have in finding and maintaining a job?

_____ specific technical skills

_____ previous work experience

_____ good job application & interviewing skills

_____ knowing the right people

_____ help from a job developer/placement counselor

_____ good attendance record

_____ positive work habits

_____ others: _____

II. EDUCATION/TRAINING

A. At what age do you anticipate or plan for your son/daughter to graduate/exit special education? (circle one)

age 18 age 19 age 20 age 21 uncertain

B. What skills or experiences do you think your child needs most to be successful after high school? Rate each item 1 - 6 (1 is most needed - 6 is least needed)

- _____ academic skills (reading, writing, and math)
- _____ daily living skills (cooking, washing clothes, budgeting, checking accounts, etc.)
- _____ work experience (actually having a job: non-paid or paid)
- _____ work attitude, human relations skills (getting along with others, dependability, etc.)
- _____ communication skills (ability to express oneself to others)
- _____ vocational / technical knowledge and skills (mastery of technical skills or job skills)

C. What are your son's/daughter's future education/training plans?

- _____ technical school (certificate program)
- _____ community college
- _____ 4 year college
- _____ military service.
- _____ adult education classes (non-credit)

D. What specific education/training program is your son/daughter considering?

III. DAILY LIVING

A. Living Skills

1. The following are life skills needed for adult living: Check areas where your child needs **more training**.

- grooming and hygiene
- doing laundry
- cleaning house
- preparing food and cleaning up
- shopping
- managing money
- using transportation
- acting safely in the community
- accessing medical care
- getting along with people
- needs sex education
- needs drug education
- other

B. Living Arrangements

1. Immediately after your son/daughter graduates, where does he/she plan to live?

- parents' home
- apartment or house, alone or with a roommate (circle one)
- apartment or house with support from an adult services agency, alone or with roommate (circle one)
- group home
- other: _____

2. Five years after your son/daughter graduates, where does he/she plan to live?

- parents' home
- apartment or house, alone or with a roommate (circle one)
- apartment or house with support from an adult services agency, alone or with roommate (circle one)
- group home
- other: _____

C. Financial Support

1. After graduation, how will your child be supported? (check all that apply)

- His/her own wages
- Social Security/SSI
- Your financial support
- Other: _____

2. How will your child manage their money after graduation?
_____ Independently plan a budget and pay bills
_____ Plan a budget and pay bills with your help
_____ Plan a budget and pay bills with the support of an adult service agency
_____ Other: _____

3. After graduation what financial services will your child use?
_____ Checking account
_____ Savings account
_____ Debit card
_____ Charge card
_____ Other: _____

D. Transportation

- I. After graduation, how will your child travel in the community?
_____ Drive his/her own/family car
_____ Transported by parents
_____ Busy Wheels/County Transportation
_____ Public transportation
_____ Other: _____

IV. LEISURE ACTIVITIES

A. What does your child do for fun?

- _____ Hobbies & interest
_____ Sports and other physical activities
_____ School/community activities
_____ Entertainment

B. After graduation will your child have access to these leisure activities, or develop new interests?

V. COMMUNITY PARTICIPATION

- A. Once your child turns 19 years old:
_____ He/she will be independent, making his/her own decisions, managing his/her own affairs.
_____ He/she will be in need of a personal representative or advocate for assistance
_____ You or a family member will be his/her legal guardian

- B. Do you know about funding available to assist people with disabilities?
(check those you know about)

- _____ SSI (Supplemental Security Incomes)
_____ Social Security Disability
_____ Medicaid
_____ Developmental Disabilities Services (DDS)

- C. Are you in contact with any adult agencies at this time
(Le., Vocational Rehabilitation, Developmental Disabilities)?

<u>Agency</u>	<u>Name of agency/contact</u>
_____	_____
_____	_____
_____	_____

- D. List any specific concerns that you would like us to be aware of.