

# TRANSITION PLANNING AREAS / CHECKLIST

(date the service to be addressed on the line – then - transfer info onto pg. 3 of Transition Folder)

Student name \_\_\_\_\_

## 1. EDUCATION

- No Support Needed
- Vocational Training
- Vocational Assessment
- GED
- College Prep
- Independent Skills
- Other

## 2. RECREATION/LEISURE

- No Support Needed
- Church groups, clubs, etc.)
- Family Activities
- Specialized Recreation
- Peer Activities
- Other

## 3. PERSONAL / RESIDENTIAL

- No Support Needed
- Independent Living
- Living with Family
- Supported Living
- ICF/Community Residence
- Housekeeping Skills
- Self-Care
- Other

## 4. FINANCIAL/INCOME

- No Support Needed
- Money Management/Budgeting
- Earned Income
- Banking Skills
- SSI/SSDI
- Unearned Income
- Trust fund, savings, gifts
- Other

## 5. LEGAL/ADVOCACY

- No Support Needed
- Understanding Advocacy Needs/Rights
- Wills/Trusts
- Guardianship/Advocacy
- Selective Service
- Voter Registration
- Other

## 6. MEDICAL/HEALTH

- No Support Needed
- Insurance
- Medicaid/Medicare
- Psychiatric/Psychological
- Support Group
- General Health Care
- Other

## 7. EMPLOYMENT

- No Support Needed
- Competitive Employment
- Supported Employment
- Sheltered Employment
- Day Hab./Treatment
- Other

## 8. TRANSPORTATION

- No Support Needed
- Use of Public Transportation
- Mobility Issues
- Family/Friend Supported
- Other

## 9. POST-SECONDARY/CONTINUING EDUCATION

- Application Assistance
- Financial Aide
- Training in Study, Social, and Self-Advocacy Skills
- College Interview
- Transportation
- Contact with Accommodative Services Office
- Orientation Programs
- College/Program Selection