

# Transition Planning Checklist

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_ SSD# \_\_\_\_\_

Completed By: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

## Level C

**Directions:** Complete on all students age 15 turning 16 prior to next IEP and older. Bring this completed form to the IEP meeting.

**Year Column:** Record current school year. Use the following code to record what you think this student can do right now: Code: N (No), NS (Needs Support) or Y (yes).

**IEP Column:** Record an "x" if this transition need should be discussed at the IEP. These items could result in writing an Action Plan or Goal in the IEP.

<b>I. Career/Voc-Ed/Employment</b> <small>(Can/does/will the student...)</small>	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Have a realistic career goal?				
Find a job independently?				
Know requirements/demands of preferred career?				
Demonstrate basic understanding of employment options? (full/part time, competitive, supported)				
Maintain employment without support?				
Identify and apply for agency support, if needed?				
Have an updated resume/cover letter in portfolio?				
Demonstrate general job skills and work attitudes preferred by employers for keeping and/or advancing at a job? (task focus, multi-step directions, task completion, stamina, attendance etc.)				
Have appropriate attitudes/behaviors for workplace?				
Complete job applications independently?				
Compile information for job applications? (contacts, work experience, etc.)				
Participate appropriately in job interviews?				
Maintain 93% school attendance?				
Have work experience in the community?				
Additional information/comments/questions:				

<b>II. Post-secondary Education</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Have educational ambitions beyond graduation?				
Need individual supports to access post secondary education?				
Have interest and/or ability for trade/technical training?				
Have interest in hobby, recreation leisure classes?				
Know how to apply for programs or services?				
Know where he/she would like to apply?				
Additional information/comments/questions:				
<b>III. Leisure/Recreation/Socialization</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Use free time effectively?				
Initiate individual leisure-recreation activities?				
Investigate/use various community services? (i.e. museums, movies, retail stores, parks, fast food, garage sales, etc.)				
Participate in community activities?				
Participate in agency activities?				
Use public recreation facilities independently?				
Additional information/comments/questions:				
<b>IV. Transportation</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Practice pedestrian safety?				
Have or need Metro ADA card (Call-a-Ride) or Disability card (reduced fare)?				
Utilize public transportation safely?				
Plan and schedule public transportation appointments when needed?				
Arrange a ride with a colleague or taxi on his own?				
Pass drivers test?				
Drive with a license?				
Additional information/comments:				

<b>V. Living Arrangements</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Have the potential to live independently?				
Understand and practice home safety rules?				
Have knowledge/skills to set up housekeeping?				
Additional information/comments:				
<b>VI. Medical</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Perform basic first aid for minor injuries?				
Select over-the-counter medications?				
Reliably take the correct amount of prescribed meds at indicated times on a daily basis?				
Report significant injuries/illness when needed?				
Develop/follow emergency procedures at school and at home?				
Explain medical history/allergies or medications?				
Select an appropriate health care giver and dentist?				
Identify the appropriate medical professional and make an appointment?				
Understand workers comprehension plan?				
Additional information/comments:				
<b>VII. Self-Advocacy</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Present personal information when needed?				
Demonstrate appropriate assertiveness with peers?				
Demonstrate appropriate assertiveness with authority figures?				
Take an active role in his or her own IEP/Transition Plan?				
Express personal interests?				
Have a Missouri ID card or U.S. passport?				
Express personal opinions and needs?				
Ask for help or assistance when needed?				
Realize their own limitations or disabilities and how to accommodate for them?				
Self-disclose disability and accommodation needs?				
Self-monitor behavior and conduct?				
Accept responsibility for own actions?				

<b>VII. Self-Advocacy cont.</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Make personal choices and decisions regarding routine affairs?				
Make informed choices regarding long-term affairs?				
Register to vote?				
Register for selective services?				
Know how to contact DVR/agency for assistance?				
Additional information/comments:				
<b>VIII. Personal Management</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Get self up in the morning without assistance?				
Maintain personal hygiene and grooming?				
Select appropriate clothing for different occasions?				
Meet schedules and appointments on time without assistance?				
Perform routine household cleaning?				
Do laundry without prompting or with help?				
Prepare simple or prepackaged foods?				
Select and shop for appropriate foods?				
Find appropriate source for varied consumer goods? (I.e. furniture, groceries, clothing etc.)				
Find/use community services? (Post Office, library etc.)				
Remember and dial appropriate telephone numbers?				
Practice personal safety rules in all environments?				
Manage money effectively? (i.e. checking, savings, budgeting)				
Manage time effectively?				
Additional information/comments:				
<b>IX. Social Skills</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Demonstrate basic courtesy?				
Actively listen?				
Use appropriate conversation skills?				
Cooperate with supervisors and authority figures?				
Cooperate with peers?				
Have appropriate conversation skills?				

<b>IX. Social Skills cont.</b> (Can/does/will the student...)	<b>Year 20</b> ____	<b>IEP</b>	<b>Year 20</b> ____	<b>IEP</b>
Participate appropriately during group activities?				
Demonstrate self-control when faced with a stressful situation?				
Accept redirection and constructive criticism appropriately?				
Maintain social relationships with non-disabled peers?				
Differentiate between friends and acquaintances?				
Have skills to get along well with others? ( i.e. family, friends, co-workers, authority figures)				
Additional information/comments:				
<b>X. Insurance</b> (Can/does/will the student...)	<b>Year 20</b> ____	<b>IEP</b>	<b>Year 20</b> ____	<b>IEP</b>
List current insurance providers?				
Maintain Medicaid insurance on his own?				
Have private medical insurance beyond 21?				
File an insurance claim on their own?				
Understand the purpose of household and renters insurance?				
Understand the need and importance of having life insurance?				
Understand insurance options? (Medicaid/Medicare, medical, dental, auto, etc.)				
Understand insurance offered by employers?				
Additional information/comments:				
<b>XI. Financial Assistance/Income Support</b> (Can/does/will the student...)	<b>Year 20</b> ____	<b>IEP</b>	<b>Year 20</b> ____	<b>IEP</b>
Receive SSI?				
Know how to obtain SSI or other financial assistance? (food stamps, unemployment, etc.)				
Know how to manage a checking account?				
Know how to use a debit card or credit card?				
Have ability to make and maintain a budget?				
Understand how to pay bills on time?				
Fill out all paper work such as W-4, W-2 forms?				
Fill out or find someone to help them to fill out and file their income tax forms every year?				
Know how to obtain financial assistance for college? (DVR, scholarship, financial aid)				
Additional information/comments:				

<b>XII. Advocacy/Legal Services</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Understand basic rights and responsibilities of citizenship?				
Know what to do if they are arrested or get into legal trouble?				
Understand what a contract is and what their responsibilities are when they sign one?				
Need partial or full guardianship in the areas of medical, financial or legal matters?				
Understand legal implications of Transfer of Parental Rights?				
Understand issue of sexual harassment on the job?				
Additional information/comments:				
<b>XIII. Other</b> (Can/does/will the student...)	<b>Year 20__</b>	<b>IEP</b>	<b>Year 20__</b>	<b>IEP</b>
Have a Regional Office case manager or BJC case manager? Other:				
Need counseling or family support?				
Need in-home personal assistance services?				
Need assistive technologies? ( for living, work, seeing or hearing)				
Need to be connected with Division of Vocational Rehabilitation?				
Additional information / comments:				

Level C: For students with mild disabilities (i.e. LD) who choose college or competitive employment as a post-secondary goal.

Revised 8/07