Alachua County Public Schools

Exceptional Student Education
Transition Assessment (Ages 11-13) Form B

Student Name: _____   Date: _____

Student Signature: _____   Interviewer: _____

Self-Determination skills help you know yourself, your goals, and the supports you need to reach your goals.

Rate each of the following statements:	Always	Sometimes	Never
I set goals to get what I want or need.	☐	☐	☐
I make plans for reaching my goals.	☐	☐	☐
I check my progress on how I am doing toward my goals.	☐	☐	☐
I attend my IEP meetings.	☐	☐	☐
I know the goals in my IEP.	☐	☐	☐
At school, teachers listen to me when I talk about what I want or need.	☐	☐	☐
At home, my parent/guardian listens to me when I talk about what I want or need.	☐	☐	☐
I have people in my life who help me accomplish my goals.	☐	☐	☐
I ask for help when I need it.	☐	☐	☐
I know what I need, what I like, and what I enjoy doing.	☐	☐	☐
I can tell others what I need, what I like and what I enjoy doing.	☐	☐	☐
I help to make choices about the supports and accommodations I need in school.	☐	☐	☐
I can describe my learning difficulties to others.	☐	☐	☐
I take care of my personal needs (clothes, chores, meals, hygiene).	☐	☐	☐
I make friends with others my age.	☐	☐	☐
I make smart choices.	☐	☐	☐
I believe that working hard in school will help me get a good job.	☐	☐	☐