

**HANCOCK COUNTY SCHOOLS..WV
INDIVIDUALIZED TRANSITION PLAN**

PARENT SURVEY

Dear Parent,

This survey has been developed to help provide important information to guide the development of a Transition IEP. Your input is of great importance in the planning of transition activities for your son or daughter. We ask that you complete the parent survey and return to your child's teacher. Thank you.

CHILD'S NAME _____ Grade _____ Age _____

Person Responding _____ Date ____ / ____ / ____

Please check below all areas that relate to the goals you have for your child.

Training/Employment

- 4 year College
- 2 year College
- Vocational School
- Trade or Business School
- Military School
- Employment immediately following
- Supported employment after graduation
- Other _____

Living Options

- Living alone independently
- Living with parents
- Living with husband/wife
- Living in a supervised residential
- Living with other relatives
- Living in a semi-supervised setting
- Other _____

Community Participation

- Using public transportation
- Driving a car
- Voting
- Shopping for personal goals
- Participating in local clubs
- Using community banking services
- Seeking support from public agencies

What activities have helped your child to prepare for post-secondary training, employment or education? (Work experience, vocational classes, career classes).

Is your child presently involved in community activities or organizations? (Scouts, clubs, church groups, volunteer-work).

Does your child move independently throughout the community? (Examples: drive a car, use public transportation, ride-bicycle, access public businesses and facilities).

What are your child's responsibilities in the home? (Examples: household chores, caring for other family member, caring for self and others).

ADDITIONAL COMMENTS: _____

PLEASE RETURN TO CHILD'S TEACHER ALONG WITH NOTICE OF IEP

White - Central Office Yellow - School