## Level One Career Assessment Secondary Parent Input Form 2014-15

Student			Date			
School ID #			School			
Completed by		Relationshi	p to Student			
Please answer the following questions so that we can understand your child's plans and needs for the future:						
My son/daughter:	Agree	Disagree	With Assistance			
Starts and completes a chores/task that he/she starts						
List chores or responsibilities your son/daughter has at home:						
Can follow multi-step directions						
Able to accept constructive criticism						
Works/plays with friends						
Has worked in a paid or volunteer job experience						
Please provide example(s) of work experience:						
Able to complete homework independently						
Can prepare a simple meal using a stove						
Can ride the RTS bus independently other than to school						
Able to make purchases at a store and receive correct						
change						
	TT74 / 1	<b>a</b>				
I believe my son/daughter:	Without	Support i	n Continuous			

I believe my son/daughter:	Without	Support in	Continuous
	support	the beginning	support
Will live on his/her own after high school			
Will go to college or a vocational training program			
Will get a get and maintain a job after high school			

Have you discussed with your child his/her career interest(s) and explored the requirements needed in order to pursue this/these areas (ie.college/vocational training needed)? Yes\_ No\_

What is your child's career goal? What would they like to do when they are done with high school?

Based upon your child's interests and abilities, what jobs/careers do you think your child would enjoy and succeed in?

Describe your child's strengths, skills, and/or talents that could help develop or achieve his/her career goal?

What skills do you think your son/daughter needs to develop to help them reach their career goal(s)?

Are there any medical concerns that could impact on your son/daughter's vocational/career planning?

## **Employment/Education/Training** (*Please check all that apply*)

- \_\_\_\_\_will attend a 2 or 4 year college
- \_\_\_\_will work full/part-time
- \_\_\_\_\_will participate in vocational training
- \_\_\_\_\_will need a Day Habilitation setting
- \_\_\_\_\_will need supported employment with a job coach
- \_\_\_\_\_will enlist in the military

Would you like to disc	cuss any of the follo	wing with a teacher or counselor?	( <i>Please check all that apply</i> )
program of study	class schedule	progress towards graduation	expected diploma type

What concerns and or questions do you have for your child's education and future plans?

## PLEASE RETURN THIS COMPLETED QUESTIONNAIRE TO YOUR CHILD'S TEACHER. THANK YOU! Guardian/Parent's Signature Date Place a copy in student's cum folder