

# Transition Planning Parent Interview (Grades 7-8)

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Date of Interview \_\_\_\_\_

An important part of special education planning is considering plans for after high school. As part of the current special education evaluation, we are collecting information from you to determine where you see your child functioning after high school. This information will be incorporated into the assessment and programming.

## EMPLOYMENT

Does your child have good school attendance?	Usually	Sometimes	Never
Does your child get along well with others?	Usually	Sometimes	Never
Does your child demonstrate good listening skills?	Usually	Sometimes	Never
Does your child complete school work on time?	Usually	Sometimes	Never
Does your child show initiative by beginning tasks right away?	Usually	Sometimes	Never
Do you think your child will hold a job while attending high school? If yes, what kind of job?	Yes	No	

Upon graduation, what kind of employment do you expect your child to have?

Supported/sheltered employment  
 Full time competitive employment  
 Part time competitive employment  
 Full time student (attending college or other training program)  
 Part time employment/Part time student (attending college or other training program)

What kind of career do you see your child having after high school?

Will it require post secondary education or training?                      Yes                      No

## POST SECONDARY EDUCATION AND TRAINING

When and where does your child do homework each night?

What plans do you see for your child after high school?

Go right to work full time                       Attend a 2-year college\*\*                       Join the military  
 Attend a technical/vocational college\*\*                       Attend a 4-year college\*\*

\*\*Have they expressed interest in a particular area (i.e. welding, nursing, etc.)?

\*\*Will your child need financial aid assistance?

In which classes is your child most successful?

In which classes does your child need the most assistance?

Does your child ask his/her teachers for help if they have questions? Usually Sometimes Never

What kind of help does your child need to be successful in learning?

Does your child have a good understanding of their disability and how it impacts them in school? Yes No

### FAMILY LIVING

What work or chores does your child do at home (i.e. prepare meals, does dishes, laundry, etc.)?

Does your child eat well-balanced, healthy meals each day? Usually Sometimes Never

What time does your child go to bed each night? \_\_\_\_\_

Do they get themselves up in the morning? Usually Sometimes Never

Does your child have good healthy habits, like avoiding tobacco, alcohol and drugs?  
Usually Sometimes Never

Does your child demonstrate good personal hygiene and grooming? Usually Sometimes Never

Does your child have a bank account (i.e. saving account, etc.)? Usually Sometimes Never

If not, when do they plan to open an account? \_\_\_\_\_

### RECREATION AND LEISURE/COMMUNITY PARTICIPATION

What hobbies or activities does your child enjoy?

In which extracurricular activities does your child participate in after school?

Does your child belong to any groups, clubs, or organizations (i.e. 4H, YMCA, church youth group, etc.) Yes No  
If so, which group(s)? \_\_\_\_\_

Does your child prefer to do things alone or with others? Alone With others Both

How many minutes per night does your child spend watching TV, playing video games, or on the computer?

\_\_\_\_\_ 0-60 minutes                      \_\_\_\_\_ 60-90 minutes  
\_\_\_\_\_ 90-120 minutes                      \_\_\_\_\_ More than 120 minutes

Does your child get regular exercise, at least 3 x per week? Usually Sometimes Never

What does your child like to do for fun when they are not in school

Does your child plan to get their driver's permit and license in high school? Yes No

How does your child find contact information (i.e. a friend's phone number, business address, etc.)

\_\_\_\_\_ Use phone book                      \_\_\_\_\_ Ask parent  
\_\_\_\_\_ Use internet resources (i.e. Mapquest, Questdex, Google, etc.)                      \_\_\_\_\_ Other \_\_\_\_\_

What kind of help do you need from the school (i.e. guidance counselor, special education teachers, etc.) to help prepare your child for life after high school?