

Credit Audit Worksheet

Student _____ **DOB** _____ **School** _____ **Date** _____

This is a summary of the units or credits for the above named student. When this student successfully completes the required units or credits in the high school grades, including required courses specified for completion of their program as indicated by their Individual Education Plan (IEP), he/she will be awarded the following document of program completion

_____ i.e. regular diploma, vocational diploma, certificate of completion

Each line below corresponds to .5 credit of the required credits needed for graduation. Indicate the class or course that fulfills each .5 credit. An official transcript should accompany this document.

Language Arts	Social Studies	Math
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Other Required Courses	Physical Education	Science
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Electives		
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Student Activities / Honors / Awards Worksheet

Update annually

STUDENT ACTIVITIES		STUDENT HONORS / AWARD	
Activity	Date	Honor / Award	Date

Student Transition Interview

Student Name _____ Date _____ DOB _____ Grade _____
Dad's Name _____ Phone _____ Phone _____
Work _____ Home _____
Mom's Name _____ Phone _____ Phone _____
Work _____ Home _____

Education

What kind of vocational training/education would you like to have after high school and what would you like to study? _____

What school/training do you plan to attend? _____

What source(s) of funding can help pay for your education?

FAFSA ___: Agency ___; Parents ___; Your Bank Account ___

What are your best subjects? _____

What are the classes that give you the most trouble? _____

In what year do you plan to graduate? _____

How do you learn best?

___ watching others; ___ listening to others; ___ working with your hands;

Career

What would you like to be doing 2 –5-10 years from now?

o In 2 Years? _____

o In 5 Years? _____

o In 10 Years? _____

What careers are you interested in? _____

How did you arrive at these ideas? _____

What work experiences have you had? What did you like or dislike about each one?

o Job Shadowing

o Summer Youth

o In-School Work

o Community Job

o Volunteer Work

Student Transition Interview [con't]

Community/Independent Living

Where do you want to live after you graduate?

- On my own in an apartment or house
- With a roommate
- Supervised living situation
- With family

What chores/jobs do you do at home that help you as an independent adult?

- Cooking
- Laundry
- Yard Work
- Shopping
- Cleaning
- Other:

What kind of transportation will be available to you after you graduate?

- Have a driver's license and a car
- Walk or ride a bike
- Public transportation
- Supported transportation (family, car pool)

If you moved out on your own tomorrow, what kinds of help would you need?

- Money management/budgeting
- Using a checkbook/paying bills
- Domestic skills/household management
- Locating housing

Do you have current medical needs that require support after high school?

- No
- Yes – Explain:

Do you have a family doctor? ___yes ___no Do you know his/her name? ___yes ___no

Do you have a family dentist? ___yes ___no Do you know his/her name? ___yes ___no

Do you know your personal medical conditions? [i.e. allergies, seizure disorder, etc.]

Do you know what your prescription medications are? ___ yes ___ no

Do you know how to get them? ___ yes ___ no

Do you know what a lawyer is for? ___ yes ___ no

Do you know where to contact a lawyer? ___ yes ___ no

Interagency Linkages

What agencies have you contacted and/or will be helping you?

Communication and Social Interaction

Are there any areas of your personal life you are having difficulty with?

- Motivation
- Peer relationships
- Drugs / alcohol
- Family conflicts
- School difficulties
- Other:
- Behavior
- Hygiene

How do you handle stress and pressure especially when things don't go your way?

What positive things do you do for other people?

What are your reservations or fears about moving into the adult world?

If you moved out on your own tomorrow, what kinds of help would you need communicating?

- Using the phone
- Oral Communication with others
- Written communication
- Self -advocacy

Recreation and Leisure

What are your hobbies or free time activities?

By yourself? _____

With others? _____

After you graduate, what would you like to be involved in?

- Group activities
- Church groups
- Team/organized sports
- Other:
- Individual sports [bicycling, swimming, etc.]
- Vocational school
- 4 year college

The following are necessary in order to function independently in a community. Which of these items do you currently have?

<input type="checkbox"/> Social Security Card	<input type="checkbox"/> Savings Account
<input type="checkbox"/> Colorado ID	<input type="checkbox"/> Birth Certificate
<input type="checkbox"/> Colorado Driver's License	<input type="checkbox"/> Checking Account

Other concerns or questions about your future?

Pocket Resume [Copy this page. Fold in half horizontally, then fold the two sided pocket resume in half vertically to create a booklet. Trim the edges if needed.]

Are you Ready for Your Job Interview?

BE PREPARED

- Know something about the business or employer
- Complete the Pocket Resume
- Review the job qualifications / get clarification

APPEARANCE AND ATTITUDE

- Be appropriately dressed for the interview
- Be alert and interested
- Be polite and positive
- Leave troubles and bad attitudes at home

THE INTERVIEW

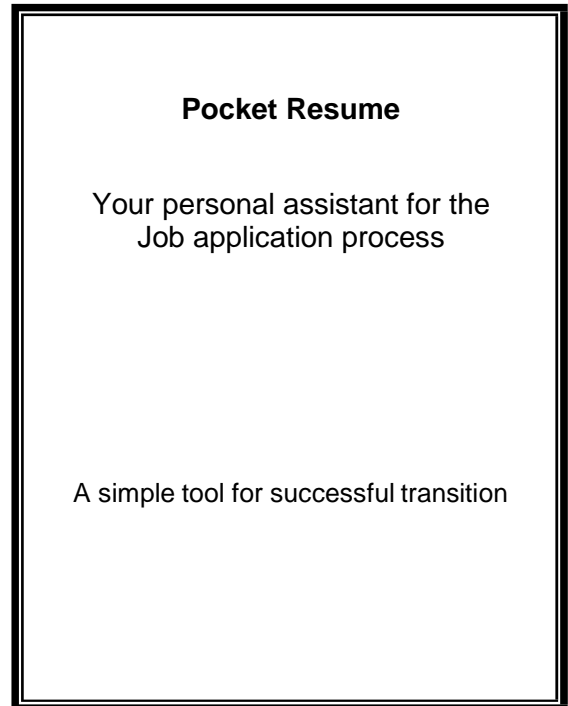
- Answer questions directly and truthfully
- Know why you want to work for the employer
- Listen carefully
- Don't be afraid to ask questions
- Be realistic about how much you will earn

YOU HAVE TO TAKE A TEST

- Listen to or read instructions carefully
- Read each question thoroughly
- Write legibly – use a black or blue ink pen
- Pace yourself – don't take too long on one question

TAKE WITH YOU TO THE INTERVIEW

- Social Security Card
- Driver's License / State ID
- School ID
- Pocket Resume



Birth date		Social Security #		Drivers License #		Notes
Education						
Highest grade Completed __	Name and Address of School	How long attended	Year graduated	Course / certificate or degree		
Other training Classes, etc.						
Any tools, Equipment, Or machines operated						
Previous Employment						
Employer's Name and Address	Name of Supervisor	Worked from	Worked until	Wage or Salary		
References <i>(remember to get permission before using someone's name)</i>						
Name	Address	Phone Number				

◆ WHAT'S MY LEARNING STYLE?

SELF-QUIZ: CHECK YES OR NO BESIDE EACH OF THE FOLLOWING STATEMENTS TO REFLECT HOW YOU LEARN AS A GENERAL RULE. BE HONEST AND THINK IN TERMS OF MOST OF THE TIME, NOT EXCEPTIONS.

	YES	NO
1. I LEARN A LOT FROM LISTENING TO INSTRUCTORS AND OTHER KNOWLEDGEABLE PEOPLE.		
2. I FIGURE THINGS OUT BEST BY TRIAL AND ERROR.	---	---
3. BOOKS ARE EASY FOR ME TO LEARN FROM.	---	---
4. GIVE ME A MAP AND I CAN FIND MY WAY.	---	---
5. I LIKE TO HAVE DIRECTIONS EXPLAINED TO ME VERBALLY.	---	---
6. I CAN OFTEN ASSEMBLE SOMETHING I JUST BOUGHT WITHOUT LOOKING AT THE INSTRUCTIONS.		
7. I LEARN A LOT FROM DISCUSSIONS.	---	---
8. I'D RATHER WATCH AN EXPERT FIRST AND THEN TRY A NEW SKILL.		
9. THE BEST WAY FOR ME TO LEARN HOW SOMETHING WORKS IS TO TAKE IT APART AND PUT IT BACK TOGETHER.		
10. I CAN REMEMBER MOST OF WHAT IS SAID IN CLASSES AND MEETINGS WITHOUT TAKING NOTES.		
11. THE CLASSES THAT I WAS BEST AT IN SCHOOL INVOLVED PHYSICAL ACTIVITY AND MOVEMENT.		
12. DIAGRAMS AND DRAWINGS HELP ME UNDERSTAND NEW CONCEPTS.		

[ADAPTED WITH PERMISSION: STEINBACH, B., (1993). *THE ADULT LEARNER: STRATEGIES FOR SUCCESS*. Crisp Publications, Inc.]

RESULTS

WHILE IT IS NOT A SCIENTIFIC ASSESSMENT, THE SELF-QUIZ TELLS YOU SOMETHING ABOUT HOW YOU LEARN BEST.

- A "YES" TO QUESTIONS 1, 5, 7, AND 10 INDICATES THAT YOU LEARN BY HEARING IT FIRST: YOU ARE A "GOOD LISTENER" OR STRONG AUDITORY LEARNER.
- A "YES" TO QUESTIONS 3, 4, 8, AND 12 INDICATES THAT YOU LEARN BY READING, WATCHING AND STUDYING DIAGRAMS: YOU ARE A STRONG VISUAL LEARNER.
- A "YES" TO QUESTIONS 2, 6, 9, AND 11 INDICATES THAT YOU LEARN BY DOING THINGS: YOU ARE A STRONG KINESTHETIC LEARNER.

While a short quiz like this cannot diagnose accurately how you learn, it can provide insights into how you see yourself and the learning process. This is especially helpful in understanding how you match up with a particular learning task or instructor. For example, if you are a strong kinesthetic learner, you may be frustrated with lectures where you are expected to sit and listen.

◆ Personal Learning Style

According to this inventory I learn best through. . . .

This agrees or disagrees with my experience in the following ways.

The biggest difference between how I learn as an adult and how children learn is . . .

SOCIAL SKILLS INVENTORY – NEEDS ASSESSMENT

Student's Name: _____

Your Name: _____ Date: _____

Please rate _____'s skills in comparison to peers; add comments / examples as relevant.
Thank you!

PROBLEM SOLVING

Uses conflict resolution strategies with peers.

very low low same high very high

Uses problem solving steps (Stop, Think, Choose, Evaluate) when necessary.

very low low same high very high

SELF-AWARENESS / ADVOCACY

Evaluates effectiveness of personal learning strategies and asks for adjustments in learning environment when necessary.

very low low same high very high

Asks for and accepts help from peers and teacher.

very low low same high very high

INTERPERSONAL / SOCIAL SKILLS

Compliments others.

very low low same high very high

Offers to help peers.

very low low same high very high

Invites peers to play! Interact.

very low low same high very high

Skillfully initiates or joins conversations with *peers*.

very low low same high very high

Participates in discussions with peers (when included by peers),

very low low same high very high

Works cooperatively with others in a group.

very low low same high very high

Displays good leadership skills.

very low low same high very high

Displays a sense of humor.

very low low same high very high