

TRANSITION SKILLS INVENTORY

Student Form

In order to help you think about your dreams for the future and your goals for next year, we want to get your opinion on how well you are doing in four broad areas:

- (1) personal life
- (2) jobs
- (3) education and training
- (4) living on your own.

In each of these areas, we have identified several skills for you to consider. After thinking about each skill, please use the rating scale below to indicate your sense of how well you are doing in that skill. You will notice that one of the rating possibilities allows you to indicate that a particular skill doesn't apply to you. For each of the skills described, please indicate your rating by placing a check mark "✓" in the appropriate column according to the codes below:

- U** = I **usually** do this
S = I **sometimes** do this
H = I **hardly ever** do this
DK = I **don't know how** to do this

PERSONAL LIFE

Communicating with Other People	U	S	H	DK
1. Do you look people right in the eye when you talk to them or when they talk to you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you listen carefully to other people when they talk to you and do you work hard at trying to understand what they are saying?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Can you tell what other people are really thinking or feeling by the look on their face or the tone of their voice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. When you are talking to other people, do you treat them with respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relating to Authorities				
5. If you don't know what a teacher or employer wants you to do, do you ask questions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. If you know what a teacher or employer wants you to do, but you still need help, do you ask questions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If teachers or employers try to correct something you are doing, do you accept their help?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If you think that a teacher or employer isn't treating you fairly, do you stand up for your rights without getting angry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relating to Peers				
9. Do you get along well with people your own age?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. If something isn't going well between you and your friends, do you work it out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. If you need something from a friend, do you ask for it?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. If somebody tries to take advantage of you, do you stand up for yourself and stop this from happening?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility				
13. Do you complete your school assignments on time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Do you come to classes regularly on time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Do you follow through on things that you tell your friends you will do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Do you follow through on things that you tell your parents you will do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solving Problems				
17. When you have a problem, do you think of several different ways that you might solve the problem before you make up your mind?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. When you can't think of a good way to solve a problem do you ask other people to help you think of some possibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. After you have found some different ways to solve a problem, do you make your own decisions on what you are going to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. After you make a decision, do you follow through on doing what you have decided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For each of the skills described, please indicate your rating by placing a check mark “/” in the appropriate column according to the cods below:

- U** = I **usually** do this
- S** = I **sometimes** do this
- H** = I **hardly ever** do this
- DK** = I **don’t know how** to do this

Controlling Your Anger	U	S	H	DK
21. When you get mad at someone, do you solve the problem without yelling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. When you get mad at someone, do you figure out what to do without hurting that person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. When you get mad at someone, do you figure out what to do without damaging property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. When you get mad and can’t figure out what to do, do you ask for help?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure Activities				
25. Do you have a hobby (computer, musical instrument, gardening, etc.) that allows you to spend time alone every week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Do you do things for fun (going out to eat, playing a team sport, etc.) with other people every week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Do you control the amount of television you watch each week so it doesn’t interfere with other important things in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. When you have just a little bit of spare time, do you find something interesting (read a magazine, play a game, talk to friend on the telephone, etc.) to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

JOBS

Knowing about Jobs	U	S	H	DK
29. Can you explain the kinds of deductions (income tax, social security tax, etc.) that are taken away from a paycheck?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Can you explain the kinds of benefits (health, vacation, retirement, etc.) that come with some jobs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Can you describe the different kinds of job available to young people in your community?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Can you describe several different jobs possibilities that fit well with your skills/interests?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding a Job				
33. Do you use different ways (read want ads, ask family/friends) to job hunt?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Do you prepare a good resume, with the right kinds of information in it?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Do you complete job applications properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Do you perform well in a job interview?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skills on the Job				
37. Do you arrive to work and leave the job on time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Is your employer satisfied with the amount of work you do and how well you do it?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Do you follow the safety rules of your employer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Do you get along well with the other workers and your boss?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EDUCATION & TRAINING

Reading	U	S	H	DK
41. Do you accurately read short phrases (menus, newspaper headlines) and sentences (short questions on a test) ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Do you accurately read short paragraphs (cooking food directions)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Do you accurately read 2- or 3-page materials (magazine/newspaper articles)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Do you accurately read difficult materials (textbooks, computer manuals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Writing				
45. Do you accurately write short sentences (grocery list, short answers to test questions)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Do you accurately write paragraphs (short letter to friend, paragraph essay for test)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Do you accurately write 2- or 3- page assignments (English class essay, job application)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Do you accurately write difficult papers such as class research papers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math				
49. Do you add, subtract, multiply and divide whole numbers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Do you use basic units of measurement (weight in pounds & ounces, length in inches & feet, time in minutes & hour, etc.) accurately?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Do you add, subtract, multiply and divide numbers that include fractions & decimals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Do you use math skills to help solve problems in school or in the community (developing a monthly budget, determining how much wood is needed to build a fence or how much mulch is needed in a flower bed)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LIVING ON YOUR OWN

Self-Care	U	S	H	DK
53. Do you have good sleeping habits and get enough sleep?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Do you take good care of yourself when you get sick?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. When you are having personal problems, do you go to friends/family for help?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. Do you have good health habits (avoiding tobacco, too much alcohol, or harmful drugs)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Do you eat well-balanced, healthy meals each day?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Do you set a limit on the amount of junk food eaten each day?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Do you maintain your weight at a good level?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Do you exercise at least three times a week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Money Management				
61. Do you pay for things in stores without making mistakes (correct change, enough money)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Do you shop carefully and get things for good prices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Do you use a checking and/or saving account to manage your money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Do you budget your money well enough to pay for the things you want and need?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Management				
65. Do you use basic tools (hammer, pliers, screwdriver, etc.) to fix things around the house?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Do you help with cleaning chores (washing dishes, cleaning your room) every week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67. Do you help prepare meals every week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
68. Do you help to do the laundry every week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community & Leisure Activities				
69. Do you use the telephone to get information about the things you need (doctor's appointment, movie start, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70. Do you use some form of transportation (bus, bicycle, own car) to get around on you own?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
71. Do you volunteer (serving food at shelter, raising money for a charity, etc.), every week, to do something that helps other people?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72. Even if you can't vote, do you know about the people who are running for office during the next election, and do you think about who you would vote for or who should win?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Safety				
73. Do you know how to provide first aid for minor cuts, burns, bruises or sprains?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. Do you always use a seat belt in a car, or a helmet (bicycle, motorcycle, or roller blades)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. If a person asks you to do something that is dangerous, like hitchhiking, do you say no?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
76. If you need emergency help for a really bad sickness or injury, do you know how to get help?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Source: Benz, M.R. & Lindstrom, L.E. (1997). *Building School to Work Programs*. Austin, TX: ProEd