



# Winston *Transitions*

## **Parent/Guardian Interview & Statement** (Vocational/Academic Assessment)

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/ Guardian Name \_\_\_\_\_

Please answer the following questions so we can understand your son/daughter's' plan and needs for the future.  
(If you need to add please use a separate piece of paper)

### **Work/Community**

1. In which kind of things does your son/daughter seem interested in (computers, sports, TV, games, family, etc)?
2. What kind of jobs/tasks has your son/daughter talked with you about?
3. Does your son/daughter do any chores at home (laundry, cleaning, etc)?
4. What kind of work would you like to see your son/daughter do when he/she gets older?
5. Does your son/daughter feel comfortable talking to peers and/or adults?
6. Does your son/daughter add to the conversation or just listen?
7. Does your son/daughter know how and when to self-advocate?

8. Does your son/daughter get along with peers and/or adults? Who does your son/daughter get along with better?
9. Please list any medical concerns and/or medications your son/daughter is on.

## **Personal Management/Living Arrangements**

1. Does your son/daughter keep his/her room clean?
  - Does your son/daughter help with the dishes?
  - Does your son/daughter take good care of things? (Keeps things in good condition)?
2. Following program completion/ graduation do you see your son/daughter living at home, living independently or in some other living arrangement?
3. In which of the following independent living areas does your son/daughter need instruction? (Please circle all that apply)

Clothing Care	Self Advocacy	Meal Prep/Nutrition
Household Management	Safety	Hygiene/Grooming
Health/First Aid	Travel Training	Consumer Skills
Community Awareness	Interpersonal Skills	Problem Solving
Time Management /Organization	Getting along with Others	Communication Skills
Appropriate behaviors	Sex Education	Other (Specify)

4. Is your son/daughter travel ready?

5. How does your son/daughter spend his/her leisure time?

6. What do you feel is lacking in your son/daughter's leisure/recreational activities?

7. How do you spend time as a family?

## **Future Academic Plans**

### **Section 1:**

1. Does your son/daughter plan to move onto college post program completion?
2. What are his/her areas of academic strength? What are his/her areas of challenge?
3. What are the ways in which your student contributes to the school community?
4. Please share with us any anecdotes that you think reflect your student's personality and character.
5. Is there anything regarding your student's learning style or organizational habits you feel would be helpful for us to know in guiding him or her through the process of applying to college?

6. Has your student faced any emotional stress, physical illness, personal challenges or difficult experiences? If so, please describe:
  
  
  
  
  
  
  
  
  
  
7. Is there anything else you feel we should know that might be helpful in our guidance: i.e., educational background, special family situation, learning differences, special medical history, personal achievements, etc...

## **Section 2:**

1. What type of academic and social collegiate environment do you believe your student will thrive in?
  - 2 year colleges
  - 4 year colleges
  - Vocational/independent living programs
  - Work force
  - Other (Please describe: \_\_\_\_\_)
  
2. Are there any special characteristics in colleges you wish your student to research, i.e. geographic location, distance from home, size, etc.? How important are these criterias?
  
  
  
  
  
  
  
  
  
  
3. Are there any particular questions/areas of concern that you have regarding the college admissions process that we can address?

## Parental Statement

1. Please describe your child, including strengths, weaknesses, personal relationships and interests outside of school.
2. Please describe your child's school experience, including the circumstances surrounding the onset of school related difficulties.
3. Is your child currently receiving support services (speech=language therapy, counseling, tutorial) within or outside of their current academic setting? Please describe type and frequency of service.
4. Why do you feel Winston Transitions would be a good school for your child?