Parent Transition Survey
Secondary

Dear Parent/Guardian:

Schertz Cibolo Universal City ISD needs you to participate in the transition planning process for your student. As students move towards graduation, it is important to begin to plan for their future. The transition plan and survey will help identify future goals and ways to support students in teaching these goals. Please take a few minutes to complete the survey and return it to the Special Education monitoring teacher on your student’s campus. For more information on transition, please visit www.transitionintexas.org or on our website under the department of special education.

Student: ____________________________  Campus: ________________  Grade: ______

Date of survey: ______________________

Name of person completing survey: ____________________________________________

Relationship to student: _______________________________________________________

Yes _____ I grant permission for my son/daughter to attend the ARD meeting.

No _____ I do not grant permission for my son/daughter to attend the ARD meeting.

*Students 18 years and older are required to attend the ARD meeting unless the parent has guardianship and denies attendance.
Please complete the choices that best reflect your concerns and thoughts about adult life for your son/daughter.

**EDUCATION**

1. How old is your son/daughter now? _____________________

2. At what age do you anticipate or plan for your son/daughter to graduate?
   _____age 17   _____age 18   _____age 19   _____age 20   _____age 21   _____uncertain

3. In what area does your son/daughter have the greatest needs? Please check all that apply.
   ____academic skills needed for postsecondary education
   ____basic academic skills (reading, writing, math)
   ____cleaning house
   ____communication skills (ability to express oneself to others)
   ____decision making/goal setting/self-advocacy
   ____friendships and social relationships
   ____meal planning, preparation & cleaning up
   ____money management skills
   ____personal care needs
   ____problem solving skills
   ____recreational/leisure skills
   ____shopping skills
   ____washing clothes, folding, etc.
   ____vocational and career exploration

**FUTURE EDUCATION**

1. Future education for my son/daughter will be:
   ____four year college/university
   ____community college/junior college
   ____vocational technical school
   ____on-the-job training
   ____adult education classes
   ____military
   ____don't know
   Other: ______________________________________________________

**CAREER & EMPLOYMENT**

1. I think my son/daughter will work in:
   ____full-time competitive employment (on his/her own)
   ____part-time competitive employment (on his/her own)
   ____supported employment (paid job with a job coach)
   ____attend a day habilitation workshop
   ____do volunteer work
   ____I don't expect my son/daughter to work
   Other: ______________________________________________________

2. What type of work does your son/daughter state that he/she is interested in?
   ____________________________________________________________

3. Do you feel this is a realistic goal?  YES or NO
4. What type of employment do you think he/she would enjoy?

______________________________________________________________

5. What type of support or assistance do you think your son/daughter will need in finding and maintaining a job? (check all that apply)
   ____ will NOT need any help
   ____ help finding a job
   ____ assistance only when problems or new situations arise
   ____ time limited support to learn the job (extra training)
   ____ long-term support needed to learn the job (ongoing training)
   ____ on-going support to perform the job (personal care attendant, etc.)

FUTURE LIVING OPTIONS

1. Five years after school, where do you want your son/daughter to live?
   ____ at home
   ____ in an apartment on their own or with a roommate
   ____ in a supported apartment/living program
   ____ in a group home
   ____ in a host family home
   Other: ________________________________

2. Concerns that you have about your son/daughter living on his/her own:
   ____ can't shop on own
   ____ can't manage money
   ____ has no furniture
   ____ not ready yet to live in the community
   ____ has been too dependent
   ____ won't take good care of self
   ____ will be lonely
   ____ will be taken advantage of
   Other: ________________________________

FINANCES & GUARDIANSHIP

1. After graduation, how do you want your son/daughter to be supported?
   ____ Social Security/ SSI/SSDI
   ____ his/her own wages
   ____ general relief (food stamps, subsidized housing, etc.)
   ____ your financial support
   Other: ________________________________

2. Do you think that when your son/daughter turns 18 years old, he/she will be:
   ____ his or her own legal guardian
   ____ will need to conservator for financial & medical decisions
   ____ will need a legal guardian appointed
   Other: ________________________________

3. Have you prepared (trust fund) for the future for your son/daughter? YES or NO

4. Have you prepared a will that includes plans for your son/daughter? YES or NO
TRANSPORTATION

1. Do you think your son/daughter will get a driver’s license? YES or NO

2. If NO, does your son/daughter have a Texas identification card? YES or NO

3. After graduation, will your son/daughter travel around town by:
   ____bicycle  ____walk  ____car pool
   ____city bus  _________his/her own car  _____Uber, Alamo Region Transit, shuttle services)
   ____getting rides in the family car or with friends
   Other: _______________________________________________

DAILY LIVING

1. Please indicate the daily living skills you would like your son/daughter to learn or improve upon:
   ____grooming and hygiene
   ____doing laundry
   ____preparing food and clean up
   ____shopping
   ____managing money
   ____using transportation
   ____practicing safety in the community
   ____social skills with people in the community
   ____other (please describe)

RECREATION AND LEISURE

1. When my son/daughter graduates, I hope he/she will be involved in:
   ____recreational activities that he/she does alone
   ____activities with friends
   ____friends with disabilities
   ____organized recreational activities (only for people with disabilities)
   ____integrated activities (team members with and without disabilities)
   ____classes (to develop hobbies, and explore interest)

2. After graduation, do you feel your son/daughter will probably:
   ____get married
   ____have a boy/girlfriend, but no marriage
   ____have children
   ____stay at home

OUTSIDE SERVICES

1. Which outside services is your son/daughter connected with?
   ____SSI/SSDI
   ____Medicaid
   ____Local Authority Agency (Bluebonnet Trails - Guadalupe County)
   ____Local Authority Agency (AACOG - Bexar County)
   ____Texas Workforce Solutions

★ SCUCISD Mission Statement ★
Schertz-Cibolo-Universal City ISD provides a safe, secure and challenging learning environment, through the responsible use of all resources, to afford opportunities for all students to realize their individual potential and to become responsible and productive members of society.