GET SET is for young people who have established some independence and are thinking about and planning for their future. The items on the checklist can be used as a guide to thinking creatively about responsibility, growing up, and setting goals. There are items in this checklist that may or may not apply to you. Challenge yourself to think creatively about each item.

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	SOMETHING I WANT TO WORK ON	WHAT DO I NEED TO DO?	DONE	•••
Self-Advocacy				•••
I know my rights to privacy, making decisions, and giving consent about my life.				•••
I know my legal rights as I am a person with a disability.				· ·
Social and Recreation				· · ·
I spend time with my friends outside of school.				•••
I know about dating and safe sex.				•••
I choose programs and activities to be involved in.				•••
Independent Living Skills				• •
I make meals with my family.				•••
I help with food shopping.				•••
I am responsible for a few chores.				•••
I pick out my clothes.				•••
I take care of my belongings.				•••
I am aware of my personal appearance and clean up regularly.				•••
I can access my bank account.				•••
I can buy things I need (clothes, iPod, school supplies) and know where to get them.				•••
I am learning to safely get around my community.				•••
I am learning to use public transportation.				•••
I can be home alone.				• •
I know how to get the healthcare supplies I need.				
I take care of my equipment (wheelchair, nebulizer, insulin pumps/syringes).				· · ·
I have tried assistive devices and technology.				•••
I know what to do in an emergency.				•••
I talk about where I would like to live in the future.				•••
School and Work				•••
I do homework by myself.				• •
If I have a disability, I know how it affects my learning.				•••
I know what I need and who I should talk to to be successful in school.				

	SOMETHING I WANT TO WORK ON	WHAT DO I NEED TO DO?	DONE
I talk about my plans after high school.			
I know what my skills and interests are, and how they are related to my career choices.			
l take part in planning for my education (guidance, IEP, or 504 meetings).			
l explore volunteer and/or part-time job opportunities.			
Health and Wellness	, i i i i i i i i i i i i i i i i i i i		
I try to exercise daily and eat healthy.			
I am comfortable with my body.			
l know the risks of smoking and alcohol and drug use.			
I know who to talk to in difficult times.			
I recognize the changes I am experiencing during my teenage years.			
I know what medications I take, how much I need to take, and when to take them.			
I meet alone with my doctor.			
I have talked with my doctor about health and wellness goals.			
I ask my doctor questions during my office visits.			
l answer questions during my office visits.			
I take part in decisions about my healthcare.			
I keep a record of my healthcare information.			
I talk with my doctor about adult services.			
I have talked with my care manager and doctor about the things I should think about when choosing an adult doctor.			
I have talked with other adults I know about going to the doctor as an adult.			
Healthcare System			
I know the date and reason for my next doctor's appointment.			
I can call my doctor's office to make or change an appointment.			
I know the name of my health insurance and have information about how it works.			
I know the difference between primary and specialty care providers.			

The decision to move on to the next checklist is up to you. You can use the DONE column to help you decide. If you have a checkmark (\checkmark) beside each item that you wanted to work on, move on to the next checklist: **GO!.**