

	I do this by myself.	I do this with some help.	I need to learn how to do this.
Personal Care			
I choose my own clothes.			
I put on my clothes and shoes.			
I take a bath or shower.			
I use the toilet.			
I brush my hair.			
I brush and floss my teeth twice a day.			
(Girls) I keep track of my periods.			
(Girls) I take care of hygiene during my periods.			
I clean up after myself (like making the bed, clearing the table).			
I do household chores (like laundry, taking out the trash)			
I use a microwave.			
I use a toaster oven.			
I make a sandwich or other simple snack.			
I can get in and out of my house.			
I carry money and ID when I leave home.			
Community Skills			
I use public transportation, like a bus or train.			
I make arrangements for a ride.			
I buy something at a local store.			
I can locate a bathroom in an unfamiliar building.			
I know who to ask for help when I am lost.			
I take steps to find my own way (like using Google maps).			
Leisure time and Social relationships			
I name a friend that I like to spend time with.			
I invite a friend over to spend time together.			
I know my favorite social activities.			
I name places where I can make friends and meet new people.			
I start conversations with familiar people.			
I start conversations with new people.			
I know which people to trust and who I can ask for advice.			
I am respectful of others' personal space and property.			

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Emergencies and safety			
I identify an emergency situation (fire, power outage, water leak).			
I know what to do when there is an emergency in the house.			
I know at least two people to contact in case of an emergency.			
I know how to contact the people I need in an emergency.			
I understand physical and sexual abuse.			
I understand "stranger danger."			
I recognize bullying.			
I ask for things that I need (like food or help).			
Medical Care			
I know parts of my body.			
I know my diagnoses (problems that the doctor helps me with).			
I know the names of my doctors.			
I know the names of my medications.			
I know when and how to take my medications.			
I know how to work my medical equipment.			
I know my allergies.			
I know when I am getting sick.			
I can describe my symptoms (the bad things that I feel).			
I can ask questions about my health.			
I can answer questions about my health.			
I can talk about my worries and concerns.			
I can make decisions about my healthcare.			
I can fill out a medical form.			
Organizational skills			
I read and understand written information.			
I write down information.			
I keep voice memos on an electronic device.			
I keep important papers in a binder.			
I keep a calendar of important dates.			
I follow a schedule.			
I keep track of my medical insurance card (keep it in a reliable place).			
I make a phone call.			
I know who to contact for support.			