




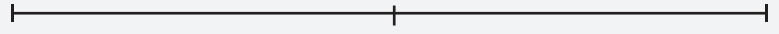
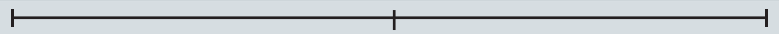
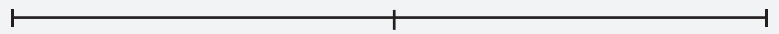
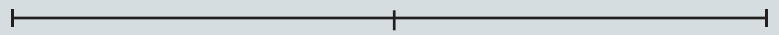
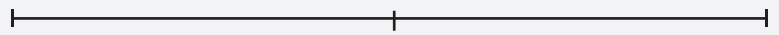
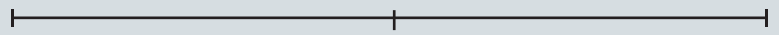
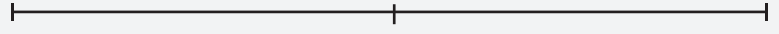
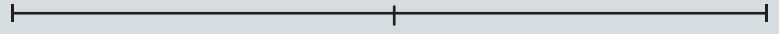
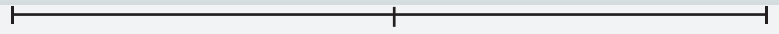




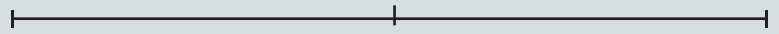
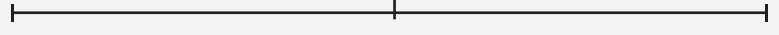




Assess whether you have difficulties with the topics mentioned in the question card and write a dash in the appropriate point on each scale. Also indicate, by ticking the appropriate section, whether you want to achieve personal change on the topic in question.

Date: \_\_\_\_\_

Name: _____	<p style="text-align: center;"><b>As regards this topic I ...</b></p> <p style="text-align: center;">  ... have a lot of difficulties                ... do not have any difficulties at all                </p>	<p style="text-align: center;"><b>I want a change to this</b></p> <p style="text-align: center;">yes     no</p>	
1. Problem-solving	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
2. Making choices	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
3. Group work	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
4. Ability to relax	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
5. Use of communication devices to keep in touch	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
6. Moving around different environments	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
7. Taking care of personal hygiene and appearance	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
8. Eating	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
9. Rules in personal relationships	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
10. Relationships with friends	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
11. School	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
12. Personal financial skills	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
13. Leisure activities	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	
14. Undertaking tasks	<div style="text-align: center;"> </div>	<input type="checkbox"/> <input type="checkbox"/>	

	As regards this topic I ...		I want a change to this	
	 ... have a lot of difficulties 	 ... do not have any difficulties at all 	yes	no
<b>15.</b> Self-control			<input type="checkbox"/>	<input type="checkbox"/>
<b>16.</b> Sleep			<input type="checkbox"/>	<input type="checkbox"/>
<b>17.</b> Ability to concentrate			<input type="checkbox"/>	<input type="checkbox"/>
<b>18.</b> Memory			<input type="checkbox"/>	<input type="checkbox"/>
<b>19.</b> Regulating emotions			<input type="checkbox"/>	<input type="checkbox"/>
<b>20.</b> Seeing the big picture			<input type="checkbox"/>	<input type="checkbox"/>
<b>21.</b> Flexibility of thought			<input type="checkbox"/>	<input type="checkbox"/>
<b>22.</b> Time management			<input type="checkbox"/>	<input type="checkbox"/>
<b>23.</b> Sensory functions			<input type="checkbox"/>	<input type="checkbox"/>
<b>24.</b> Understanding others			<input type="checkbox"/>	<input type="checkbox"/>

Resources and support	I do not receive any support		I receive a lot of help and support	
				
Family			<input type="checkbox"/>	<input type="checkbox"/>
Friends			<input type="checkbox"/>	<input type="checkbox"/>
School (supportive teaching, assistive devices etc.)			<input type="checkbox"/>	<input type="checkbox"/>
Health care (doctor, psychologist, therapist etc.)			<input type="checkbox"/>	<input type="checkbox"/>

I am most satisfied with the sections: \_\_\_\_\_

I want change especially to the sections: \_\_\_\_\_