INDEPENDENT LIVING CHECKLIST

While moving out on your own can be exciting, it requires a whole new level of responsibility. Being more independent means taking an active role in your health and wellness, personal care, job training, school work, and other areas of your life.

Below are some questions to ask yourself to see whether you are prepared to live more independently. You may not be able to answer “yes” (or “always”) to every question listed, but you should be familiar with where to go for assistance services.

**Overall Independence**

Do you have any savings?  
☐ Yes  ☐ No

Do you have a source of steady income?  
☐ Yes  ☐ No

Are you contributing to the household income (e.g., paying rent, utilities, etc.)?  
☐ Yes  ☐ No

Are you able to get from place to place independently?  
☐ Yes  ☐ No

Do you have a place to live or have you begun looking for one?  
☐ Yes  ☐ No

**Social Supports and Staying Emotionally Healthy**

Do you have friends that you spend time with on a regular basis?  
☐ Yes  ☐ No

Do you regularly communicate with family and friends?  
☐ Yes  ☐ No

Is there at least one person you talk to when you feel sad, nervous, or things aren’t going well?  
☐ Yes  ☐ No

Are you familiar with the common symptoms of depression?  
☐ Yes  ☐ No

Do you seek help from others when you experience those symptoms?  
☐ Yes  ☐ No

What are your hobbies? Or, what do you enjoy doing?  

Do you regularly make time for these activities?  
☐ Yes  ☐ No

**Staying Physically Healthy**

If you take medications, do you know the name, dosage, reason, and potential side effects for each prescription?  
☐ Yes  ☐ No

Do you take your medication as prescribed and without being prompted?  
☐ Yes  ☐ No
Have you taken time to learn about the options available for preventing pregnancy, HIV/AIDS, and sexually transmitted diseases?

- Yes
- No

Do you independently and effectively handle your personal hygiene?

- Yes
- No

Are you familiar with the risks associated with smoking, drinking, and using drugs?

- Yes
- No

Do you exercise regularly?

- Yes
- No

Are you satisfied with your current weight?

- Yes
- No

**School and Work**

What type of things are you good at?

What topics or careers would you like to learn more about?

Do you have career goals?

- Yes
- No

Are you familiar with the options available to help cover the cost of job training or college?

- Yes
- No

Do you volunteer regularly?

- Yes
- No

Do you attend classes/work regularly?

- Yes
- No

Do you think that your school/work assignments are at the right level for you?

- Yes
- No

Are you doing well in school and/or at work?

- Yes
- No

**Accessing Health Care**

How is your health care paid for?

Who is your family doctor (or, what is the name of the clinic you go to for care)?

Do you regularly schedule and get to medical and dental appointments independently?

- Yes
- No

Are you independent in your health care decision making?

- Yes
- No

Are you familiar with how to use your insurance or medical card?

- Yes
- No

Are your immunizations current?

- Yes
- No

Have you found an adult health care provider?

- Yes
- No

Have you had your first appointment with your adult providers?

- Yes
- No

For more information, download the *Making the Move to Managing Your Own Personal Assistance Services (PAS) Toolkit for Youth with Disabilities Transitioning to Adulthood* available at [www.ncwd-youth.info](http://www.ncwd-youth.info).