



The Casey Life Skills (CLS) is a multiple-choice questionnaire that measures independent living skills in several functional areas for young people. The CLS Supplemental Assessment for American Indian/Alaska Native groups is a comprehensive 22 question assessment for youth identifying as American Indian/Alaska Native. This assessment can be completed by youth and their supportive adults (e.g., caregivers, service providers, case workers, etc.) to understand the youth's skills within the context of their tribal affiliation.

The Casey Life Skills Toolkit, which includes the full suite of CLS Assessments, Practitioners Guide and Resources to Inspire Guide, is hosted at:

www.casey.org/casey-life-skills/

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POWER

FAMILY

STABILITY

HOPE

FUTURE

Date (mm/dd/yy) _____

Name _____

Birthdate (mm/dd/yyyy) _____

Gender Identity

- Female
- Male
- Transgender Male
- Transgender Female
- Two-Spirit
- Non-binary
- Other _____

Sexual Orientation

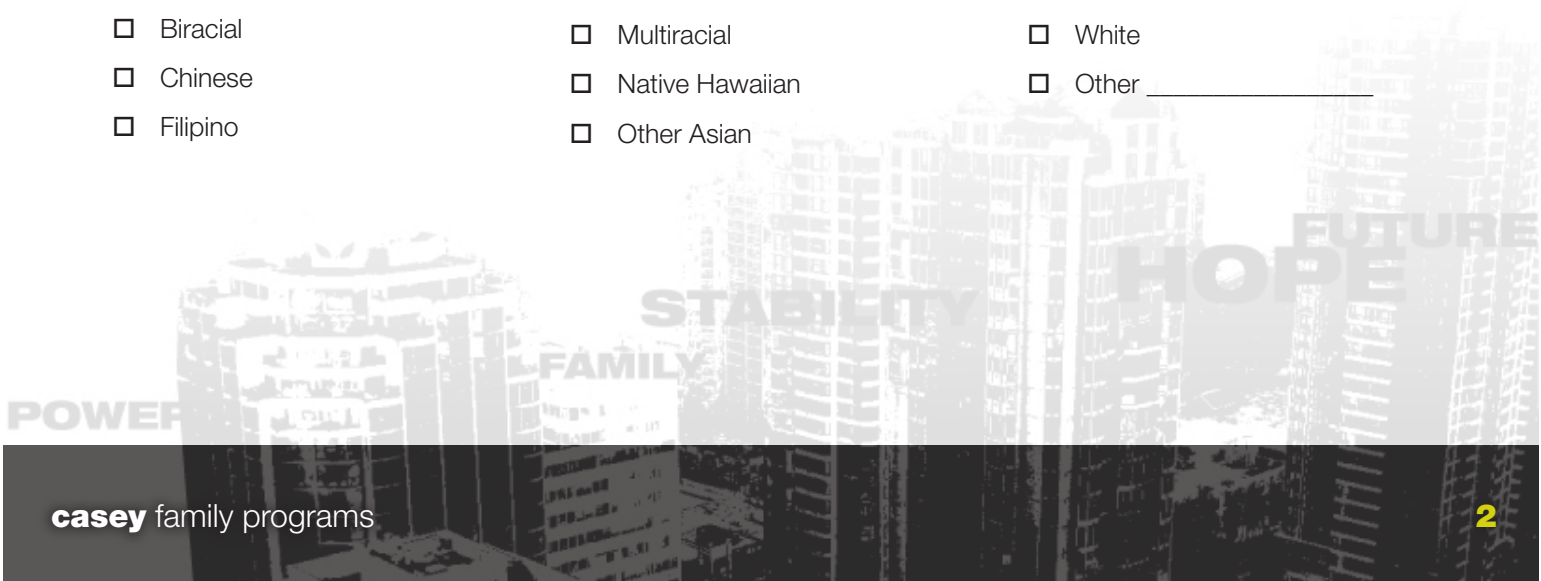
- Gay
- Lesbian
- Queer
- Bisexual
- Asexual
- Questioning
- Pansexual
- Heterosexual/Straight
- Prefer not to say
- Other _____

Pronouns

- She, Her, Hers
- He, Him, His
- Ze, Hir
- They, Them, Theirs
- Other _____

Race

- African American/Black
- American Indian/ Alaska Native
- Asian Indian
- Biracial
- Chinese
- Filipino
- Guamanian or Chamorro
- Japanese
- Korean
- Multiracial
- Native Hawaiian
- Other Asian
- Other Pacific Islander
- Samoan
- Vietnamese
- White
- Other _____



Latinx/Hispanic

- | | | |
|--|--|---|
| <input type="checkbox"/> No, Not Hispanic, Latinx | <input type="checkbox"/> Yes, Salvadoran | <input type="checkbox"/> Yes, Honduran |
| <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano | <input type="checkbox"/> Yes, Dominican | <input type="checkbox"/> Yes, Ecuadorian |
| <input type="checkbox"/> Yes, Puerto Rican | <input type="checkbox"/> Yes, Guatemalan | <input type="checkbox"/> Yes, Peruvian |
| <input type="checkbox"/> Yes, Cuban | <input type="checkbox"/> Yes, Colombians | <input type="checkbox"/> Yes, Other Hispanic Latino |

Religious/ Spiritual Affiliation

- | | | |
|------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> Christian | <input type="checkbox"/> Hindu | <input type="checkbox"/> No religious/ Spiritual affiliation |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> Baha'i | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Muslim | <input type="checkbox"/> Atheist | |
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Agnostic | |

Primary Language

- | | | |
|----------------------------------|-----------------------------------|--|
| <input type="checkbox"/> English | <input type="checkbox"/> Chinese | <input type="checkbox"/> Sign Language |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Japanese | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> French | <input type="checkbox"/> Russian | |

Secondary Language

- | | | |
|----------------------------------|-----------------------------------|--|
| <input type="checkbox"/> English | <input type="checkbox"/> Chinese | <input type="checkbox"/> Sign Language |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Japanese | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> French | <input type="checkbox"/> Russian | |

Do you have a documented disability?

- | | | |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Prefer not to say |
|------------------------------|-----------------------------|--|

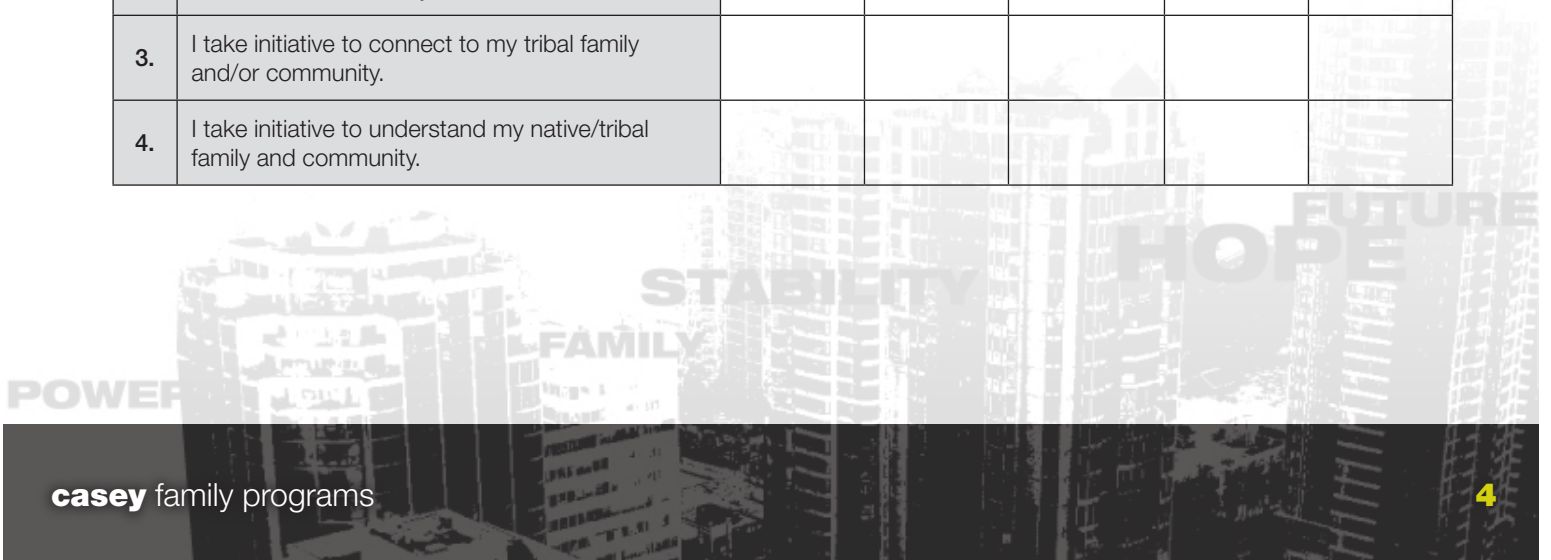


TRIBAL AFFILIATION

	Are the following statements like me	Yes	Mostly Yes	Somewhat	Mostly No	No
1.	I know how to become an enrolled member of my tribe.					
2.	I feel comfortable identifying as a native/indigenous person.					
3.	I am aware of my ancestral history and connection.					
4.	I know how to actively stay connected with my tribe/native community.					
5.	I am familiar with my tribe's culture and traditions such as food, religious/spiritual beliefs and practices, and language.					
6.	I take the initiative in learning about my tribe's culture and traditions.					
7.	I know how to actively participate in my tribe's cultural/ traditional activities.					

FAMILY AND COMMUNITY

	Are the following statements like me	Yes	Mostly Yes	Somewhat	Mostly No	No
1.	I have an elder or someone from my community who I can talk to.					
2.	I feel a strong connection with my tribal/native community.					
3.	I take initiative to connect to my tribal family and/or community.					
4.	I take initiative to understand my native/tribal family and community.					



	Are the following statements like me	Yes	Mostly Yes	Somewhat	Mostly No	No
5.	I know how to participate in my tribe/native community events.					
6.	I understand how to support my native/tribal community.					

BELIEFS AND TRADITIONS

	Are the following statements like me	Yes	Mostly Yes	Somewhat	Mostly No	No
1.	I know my Indian or spiritual name.					
2.	I seek my native/tribal culture for help when I feel physically unwell.					
3.	I seek my native/tribal culture for help when I feel mentally unwell.					
4.	I turn to my native/tribal culture when I have a tough time making decisions.					
5.	I find ways to live in balance and harmony.					

LIVING IN TWO WORLDS

	Are the following statements like me	Yes	Mostly Yes	Somewhat	Mostly No	No
1.	I feel like my native/tribal culture is seen in a positive way at school.					
2.	I have the support in connecting to other native youth.					
3.	I am respected in a non-native community.					
4.	I feel included in my non-native school.					