**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Defining Your Disability Worksheet - STUDENT**

This activity will help you define your disability in order to understand yourself better. It will help you to start thinking about some of the things that you may need after leaving high school.

1. Describe what the term “disability” means to you.
2. Describe your disability.
3. Describe how your disability may affect your after high school in the following areas of your life?

 Where and how you live?

 Your work performance?

 Getting more education or going to college?

 What other ways might disability affect you after high school?

1. What help or support, if any, will you need in college, or on the job? (*Think about the things that were put in place for you at school the help you succeed at school.)*

 **Parent initials** \_\_\_\_\_\_\_\_\_\_\_

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Defining Your Disability Worksheet - FAMILY**

This activity will help you and your student understand the impact of disability in your lives. It will help you to start thinking about some of the things that the student may need after leaving high school.

1. Describe what the term “disability” means to you.
2. Describe your student’s disability.
3. Describe how you think disability may affect your student after graduation in the following areas?

 Where and how they will live?

 Work performance?

 Getting more education or going to college?

 What other ways might disability affect your student/family after high school?

1. What help or support, if any, do you think your student will need in college, or on the job? (*Think about the things that were put in place for the student at school to help him/her succeed.)*

 **Parent initials** \_\_\_\_\_\_\_\_\_\_\_