



# Getting to Know Me

## YD 6 -12

Generously Funded by



Name: \_\_\_\_\_

D.O.B. \_\_\_\_\_ Date: \_\_\_\_\_

**Please tell us about yourself. This form will not be shared with others, please answer it truthfully. Letting us know your strengths and challenges helps us to better assist you.**

### 1. Which best describes you? (Check all that apply)

**I would rather read instructions than listen to the teacher explain them.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I like having someone explain directions aloud.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**When I study, I have to take a lot of breaks to get up and walk around.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I like to draw/doodle during class.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I remember things better when I write them down.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I study by saying things aloud.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**Charts, pictures and maps help me understand what I am reading.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I can pay attention better if I have a snack while I study.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I like to listen to music while I am studying.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I am good at seeing pictures in my mind of what I am studying.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time



**It is easy for me to remember jokes.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I can think better if I fidget by tapping my foot, playing with a pencil, or moving a little.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I prefer working by myself.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I prefer working with a friend.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I prefer working in a group of 3 or more.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I find it hard to speak up in class and/or participate in discussions.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I find it hard to read aloud.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**I find it hard to control my temper.**

Almost Never    Once in a While    Sometimes    Frequently    Almost all the time

**It is easier for me to control my temper if I try the following:**

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**2. Have you ever received or are you receiving any of the following? (Check all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Speech/Language Therapy                   | <input type="checkbox"/> Exceptional Student Education services in school |
| <input type="checkbox"/> Occupational Therapy                      | <input type="checkbox"/> Counseling                                       |
| <input type="checkbox"/> Physical Therapy                          | <input type="checkbox"/> IEP or 504 Plan                                  |
| <input type="checkbox"/> Daily Medication (not including vitamins) | <input type="checkbox"/> Other  |

**3. I learn best when I:**

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4. I do not like it when I am asked to:

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5. Activities/things that motivate me:

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6. Activities I do not like to do:

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7. School subjects I am good at:

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8. School subjects I find hard:

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9. After I complete high school, I want to:

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10. Is there anything else you'd like to share about yourself?

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***\*If you would like to talk to someone about these questions check here.***