

Parent/Guardian Name:
Applicant Name:
Date:

Parent/Guardian Readiness Scale

Adapted from the Graff Parent Readiness Scale (GRPS)

1=I strongly agree, 2=I agree, 3=I neither agree nor disagree, 4=I disagree, 5=I strongly disagree

1. I expect to know everything my student does at RFLA.

Strongly Agree 1 2 3 4 5 Strongly Disagree

2. I worry about my student talking to other students unsupervised.

Strongly Agree 1 2 3 4 5 Strongly Disagree

3. I worry about my student crossing the street.

Strongly Agree 1 2 3 4 5 Strongly Disagree

4. I need to know the homework assignment for each class.

Strongly Agree 1 2 3 4 5 Strongly Disagree

5. I need to know the calendar of activities offered to my student.

Strongly Agree 1 2 3 4 5 Strongly Disagree

6. I would like to speak with my student's support staff.

Strongly Agree 1 2 3 4 5 Strongly Disagree

7. I trust my student's judgment.

Strongly Agree 1 2 3 4 5 Strongly Disagree

8. I trust my student's ability to handle small sums of money.

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Strongly Agree 1 2 3 4 5 Strongly Disagree

9. I know my student, with support, will develop friendships.

Strongly Agree 1 2 3 4 5 Strongly Disagree

10. I know my student, with support, will try new opportunities.

Strongly Agree 1 2 3 4 5 Strongly Disagree

11. My student has the ability to handle frustration.

Strongly Agree 1 2 3 4 5 Strongly Disagree

12. My student has the ability to seek assistance.

Strongly Agree 1 2 3 4 5 Strongly Disagree

13. Often, I am in contact with my student more than 3 times a day.

Strongly Agree 1 2 3 4 5 Strongly Disagree

14. Often, I am telling my student what to do and say.

Strongly Agree 1 2 3 4 5 Strongly Disagree

15. I check up on my student.

Strongly Agree 1 2 3 4 5 Strongly Disagree

16. I check to see if my student has the correct facts.

Strongly Agree 1 2 3 4 5 Strongly Disagree

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17. I believe, I know what is best for my student.

Strongly Agree 1 2 3 4 5 Strongly Disagree

18. I feel that my student knows what is best for him/herself.

Strongly Agree 1 2 3 4 5 Strongly Disagree

What are your son/daughter's strengths and needs?:

Describe strengths and areas of needs using the following categories. Please describe in detail any previously used supports, accommodations, and/or behavior/management plans. List any type of assistive technology utilized.

Medical: _____

Navigation: _____

Emotional: _____

Organizational: _____

Hygiene: _____



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