When Do I Want Support?

Check the boxes to say if you need support in each area.

You do not have to check a box for every category.

When you check the  "I can do this with support" box, you should think about who you might want to support you and what kind of support you need.

You can use the information in this form to help you fill out a Supported Decision-Making Agreement.

	I can do this <u>alone.</u> 	I can do this <u>with support.</u> 	I need <u>someone else</u> to do this for me. 
COMMUNICATION			
Telling people what I want and don't want			
Telling people how I make choices			
Making sure people understand what I am saying			
PERSONAL CARE			
Choosing what I wear			
Getting dressed			
Choosing what to eat, and when to eat			

When Do I Want Support?

	I can do this alone. 	I can do this with support. 	I need someone else to do this for me. 
Taking care of my personal hygiene (for example, showering, bathing, brushing teeth)			
Remembering to take medicine			
STAYING SAFE			
Making safe choices around the house (for example, turning off the stove, having fire alarms)			
Understanding and getting help if I am being treated badly (abuse or neglect)			
Making choices about alcohol and drugs			
HOME AND FRIENDS			
Choosing where I live			
Choosing who I live with			
Choosing what to do and who to see in my free time			
Keeping my room or home clean			
Finding support services and hiring and firing support staff			
HEALTH CHOICES			
Choosing when to go to the doctor or the dentist			

When Do I Want Support?

	I can do this alone. 	I can do this with support. 	I need someone else to do this for me. 
Making medical choices in everyday situations (for example, check-up, medicine from the drug store)			
Making medical choices in serious situations (for example, surgery, big injury)			
Making medical choices in an emergency			
PARTNERS			
Choosing if I want to date, and who I want to date			
Making choices about sex			
Making choices about marriage			
Making choices about birth control and pregnancy			
TRAVEL			
Traveling to places I go often (for example, getting to work, stores, friends' homes)			
Traveling to places I do not go often (for example, doctors' appointments, special events)			
JOBS			
Choosing if I want to work			
Understanding my work choices			

When Do I Want Support?

	I can do this alone. 	I can do this with support. 	I need someone else to do this for me. 
Choosing classes or training I need to get a job I want, and taking these classes			
Applying for a job			
Going to my job every work day			
MONEY			
Paying the rent and bills on time			
Keeping a budget so I know how much money I can spend			
Making big decisions about money (for example, opening a bank account, signing a lease)			
Making sure no one is taking my money or using it for themselves			
BEING A CITIZEN			
Signing contracts and formal agreements			
Choosing who to vote for and voting			
OTHER (write any other choices or activities here)			