

# Responsibilities Checklist: Education and Career Planning

Let your care team know your skill level in the following areas that are important for transition to adult healthcare by placing the number from 1 to 5 in the boxes below. There is no right or wrong answer, and your answers will be kept private.

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

**Date:** \_\_\_\_\_

**1** No, I don't know

**2** No, but I want to learn

**3** No, but I am learning to do this

**4** Yes, I have started doing this

**5** Yes, I always do this when I need to

1. I can handle my regular medical tasks, like taking medications, while at school or work

1  2  3  4  5

2. I can find trustworthy sources of information about IBD

1  2  3  4  5

3. I can talk to my teachers and school staff or my boss and coworkers about my needs related to my IBD

1  2  3  4  5

**1** No, I don't know

**2** No, but I want to learn

**3** No, but I am learning about this

**4** Yes, but I would like to learn more

**5** Yes, I could explain this to someone

4. I know what accommodations related to my IBD will help me at school/work

1  2  3  4  5

5. I know what accommodations I qualify for because of my IBD

1  2  3  4  5

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## My Goals:

Work with your care team to identify some goals and write them below. Try to make goals that are specific. Include what you want to do and how you will do it. Then, decide when you want to reach your goal. Once you've reached your goal, check it off, celebrate, and move on to the next one! You've got this!

What I want to do	How I'm going to do it	When I will have it done	I'm going to do it! (Initials)		I did it!
			Patient	HCP	
<i>Example</i>					
<i>Schedule my next appointment</i>	<i>I will review my school calendar with my parents and then call the front office to schedule my next checkup on a day I don't have soccer practice.</i>	<i>By the end of the week</i>	<i>T.S.</i>	<i>M.D.</i>	<i>✓</i>