



# Life Skills Checklist



Learning and practicing life skills is an important step for students as they plan for transitioning into adulthood. The Life Skills Checklist can help transition age students (14-22), their families, and IEP Team track independent living/life skills. This list below does not include every skill, and all these skills may not apply to all people. It is important to remember that everyone is unique, and individual support needs may vary.

| PERSONAL LIFE SKILLS   | Can Do Already | Needs More Practice | Plan to Start | Ongoing Support Needed | N/A |
|--|----------------|---------------------|---------------|------------------------|-----|
| Brushes teeth daily  |                |                     |               |                        |     |
| Showers daily with soap  |                |                     |               |                        |     |
| Washes hair  |                |                     |               |                        |     |
| Uses deodorant daily   |                |                     |               |                        |     |
| Combs/brushes hair   |                |                     |               |                        |     |
| Shaves, as needed  |                |                     |               |                        |     |
| Chooses appropriate and clean clothes to wear based on weather and occasion                              |                |                     |               |                        |     |
| Dresses themselves   |                |                     |               |                        |     |
| Can use a cell phone (text or call) and knows how to charge and update phone when needed                 |                |                     |               |                        |     |
| Can set up and manage personal voicemail   |                |                     |               |                        |     |
| Can use an alarm on phone, watch, and/or clock   |                |                     |               |                        |     |
| Washes hands/uses hand sanitizer after using restroom, before eating, etc.                               |                |                     |               |                        |     |
| Directs any support staff (e.g., personal care) who provide assistance with daily living and other needs |                |                     |               |                        |     |
| Asks for help when needed  |                |                     |               |                        |     |
| Makes choices and decisions about their own life   |                |                     |               |                        |     |
| Can recognize and report abuse, neglect, or danger   |                |                     |               |                        |     |

| <b>EMERGENCY/<br/>SAFETY SKILLS</b>  | <b>Can Do<br/>Already</b> | <b>Needs More<br/>Practice</b> | <b>Plan to Start</b> | <b>Ongoing<br/>Support<br/>Needed</b> | <b>N/A</b> |
|--|---------------------------|--------------------------------|----------------------|---------------------------------------|------------|
| Understands fire exits and what to do in case of a fire                        |                           |                                |                      |                                       |            |
| Can use a fire extinguisher  |                           |                                |                      |                                       |            |
| Knows when and how to contact 911  |                           |                                |                      |                                       |            |
| Knows how to interact with law enforcement                                     |                           |                                |                      |                                       |            |
| Knows what to do if locked out of the house                                    |                           |                                |                      |                                       |            |
| Knows when and how to unclog the sink or toilet                                |                           |                                |                      |                                       |            |
| Knows how to take care of minor wounds   |                           |                                |                      |                                       |            |
| Does not open the door to strangers or let strangers in                        |                           |                                |                      |                                       |            |
| Can lock household doors   |                           |                                |                      |                                       |            |
| Turns off stove after use  |                           |                                |                      |                                       |            |
| Avoids cars that are moving in parking lots                                    |                           |                                |                      |                                       |            |
| Knows to seek out trusted adults when needing help                             |                           |                                |                      |                                       |            |
| <b>NUTRITION/<br/>DIETARY SKILLS</b>   | <b>Can Do<br/>Already</b> | <b>Needs More<br/>Practice</b> | <b>Plan to Start</b> | <b>Ongoing<br/>Support<br/>Needed</b> | <b>N/A</b> |
| Can make a grocery list and look for items on the list in the store or online  |                           |                                |                      |                                       |            |
| Knows the difference between healthy and unhealthy foods and drinks            |                           |                                |                      |                                       |            |
| Can tell when food is bad (expired dates, color, etc.) and knows not to eat it |                           |                                |                      |                                       |            |
| Understands and generally eats a balanced diet                                 |                           |                                |                      |                                       |            |

| MONEY MANAGEMENT/<br>FINANCIAL PLANNING<br>SKILLS  | Can Do<br>Already | Needs More<br>Practice | Plan to Start | Ongoing<br>Support<br>Needed | N/A |
|--|-------------------|------------------------|---------------|------------------------------|-----|
| Knows the value of coins and currency  |                   |                        |               |                              |     |
| Can make a purchase with a card or with cash   |                   |                        |               |                              |     |
| Understands the concepts of banking balance and over drafts  |                   |                        |               |                              |     |
| Can do simple math or use a calculator   |                   |                        |               |                              |     |
| Knows how to compare prices/use coupons  |                   |                        |               |                              |     |
| Understands the difference between needs and wants   |                   |                        |               |                              |     |
| Has a bank account and is aware of financial limits when receiving government benefits (e.g., Medicaid, Social Security, etc.) |                   |                        |               |                              |     |
| Understands how to create and use a budget   |                   |                        |               |                              |     |
| Understands a paycheck (gross vs. net pay, deductions)   |                   |                        |               |                              |     |
| Knows how and when to file federal and state taxes   |                   |                        |               |                              |     |
| Knows the importance of paying bills on time, including the impact of interest and late payment penalties                      |                   |                        |               |                              |     |
| Understands the benefits and risks of credit cards and when it is appropriate to use them                                      |                   |                        |               |                              |     |
| Knows their social security number, when to use it, and how to keep it safe  |                   |                        |               |                              |     |

| HEALTHCARE SKILLS  | Can Do Already | Needs More Practice | Plan to Start | Ongoing Support Needed | N/A |
|--|----------------|---------------------|---------------|------------------------|-----|
| Knows how to get a prescription refilled   |                |                     |               |                        |     |
| Can take medication without supervision and on time                                  |                |                     |               |                        |     |
| Understands and obtains necessary immunizations                                      |                |                     |               |                        |     |
| Keeps a calendar of medical appointments   |                |                     |               |                        |     |
| Can let someone know if they are not feeling well                                    |                |                     |               |                        |     |
| Knows their height, weight, birthdate  |                |                     |               |                        |     |
| Can tell by looking at a thermometer if they have a fever                            |                |                     |               |                        |     |
| Knows how to locate their health insurance card or information                       |                |                     |               |                        |     |
| Understands what to do in case of colds, flu, fever, or other common health problems |                |                     |               |                        |     |
| Knows how to reach medical providers   |                |                     |               |                        |     |
| SEXUAL HEALTH SKILLS   | Can Do Already | Needs More Practice | Plan to Start | Ongoing Support Needed | N/A |
| Can label body parts with correct terms  |                |                     |               |                        |     |
| Understands the need for and knows how to access various forms of birth control      |                |                     |               |                        |     |
| Takes care of menstrual periods; maintains and uses supplies                         |                |                     |               |                        |     |
| Understands consent and how to give and recognize consent                            |                |                     |               |                        |     |
| Understands private places versus public places                                      |                |                     |               |                        |     |
| Understands private behavior versus public behavior                                  |                |                     |               |                        |     |

| <b>INTERPERSONAL/<br/>SOCIAL SKILLS</b>  | <b>Can Do<br/>Already</b> | <b>Needs More<br/>Practice</b> | <b>Plan to Start</b> | <b>Ongoing<br/>Support<br/>Needed</b> | <b>N/A</b> |
|--|---------------------------|--------------------------------|----------------------|---------------------------------------|------------|
| Introduces themselves to others  |                           |                                |                      |                                       |            |
| Engages in back-and-forth communication with others  |                           |                                |                      |                                       |            |
| Understands and manages personal space as needed   |                           |                                |                      |                                       |            |
| Knows how to ask (in some way) for help  |                           |                                |                      |                                       |            |
| Is courteous to others   |                           |                                |                      |                                       |            |
| Knows how to resolve conflict or how to ask for help to resolve conflict                       |                           |                                |                      |                                       |            |
| Takes turns (if game playing, e.g., bowling, cards)  |                           |                                |                      |                                       |            |
| Says no to peers or others if something feels wrong  |                           |                                |                      |                                       |            |
| Accepts “no” for an answer   |                           |                                |                      |                                       |            |
| Knows how to interrupt appropriately   |                           |                                |                      |                                       |            |
| Expresses anger or frustration appropriately   |                           |                                |                      |                                       |            |
| <b>KITCHEN SKILLS</b>  | <b>Can Do<br/>Already</b> | <b>Needs More<br/>Practice</b> | <b>Plan to Start</b> | <b>Ongoing<br/>Support<br/>Needed</b> | <b>N/A</b> |
| Safely operates appliances (cooktop, oven, microwave, toaster, dishwasher, coffeemaker)        |                           |                                |                      |                                       |            |
| Uses common kitchen tools (can opener, bottle opener, measuring cups and spoons, grater, etc.) |                           |                                |                      |                                       |            |
| Helps plan and prepare meals for self  |                           |                                |                      |                                       |            |
| Can follow a simple recipe   |                           |                                |                      |                                       |            |
| Can wash and put away dishes and/or load and unload the dishwasher                             |                           |                                |                      |                                       |            |
| Can clean kitchen (including counters, floors, and removing trash)                             |                           |                                |                      |                                       |            |

| LAUNDRY SKILLS   | Can Do Already | Needs More Practice | Plan to Start | Ongoing Support Needed | N/A |
|--|----------------|---------------------|---------------|------------------------|-----|
| Puts dirty clothes in hamper or other appropriate place                        |                |                     |               |                        |     |
| Sorts clothes for proper washing   |                |                     |               |                        |     |
| Knows how to operate a washer and dryer  |                |                     |               |                        |     |
| Knows how to use laundry detergent   |                |                     |               |                        |     |
| Cleans lint screen after each drying cycle                                     |                |                     |               |                        |     |
| Folds clothes  |                |                     |               |                        |     |
| Puts their clothes away  |                |                     |               |                        |     |
| HOUSEHOLD SKILLS   | Can Do Already | Needs More Practice | Plan to Start | Ongoing Support Needed | N/A |
| Cleans their bedroom, bathroom and other areas as needed                       |                |                     |               |                        |     |
| Makes their bed and changes the bedsheets as needed                            |                |                     |               |                        |     |
| Puts items away in the correct location  |                |                     |               |                        |     |
| Can do minor repairs (e.g., change lightbulbs)                                 |                |                     |               |                        |     |
| Knows who to contact about major repairs (e.g., landlord, repair person, etc.) |                |                     |               |                        |     |
| Picks up and disposes of trash   |                |                     |               |                        |     |
| Takes trash outside as needed  |                |                     |               |                        |     |
| Operates a vacuum  |                |                     |               |                        |     |
| Sweeps and mops floors   |                |                     |               |                        |     |

| COMMUNITY SKILLS   | Can Do Already | Needs More Practice | Plan to Start | Ongoing Support Needed | N/A |
|--|----------------|---------------------|---------------|------------------------|-----|
| Can use public transportation (taxi, bus, train, Uber/Lyft, paratransit, etc.)             |                |                     |               |                        |     |
| Knows to be alert in unfamiliar settings and at night                                      |                |                     |               |                        |     |
| Consistently wears a seatbelt  |                |                     |               |                        |     |
| Locates goods, services, and people using Internet searches (Google, phone listings, etc.) |                |                     |               |                        |     |
| Orders from a menu   |                |                     |               |                        |     |
| Crosses streets safely   |                |                     |               |                        |     |
| Keeps driver's license or state issued ID card updated                                     |                |                     |               |                        |     |
| Uses the post office   |                |                     |               |                        |     |
| Uses bank services   |                |                     |               |                        |     |
| Knows where to go to vote and how to ask for accommodations if needed                      |                |                     |               |                        |     |

**This document is excerpted and updated from the following documents and includes additional content created by PEATC.**

Adolescent Autonomy Checklist – Indiana University: [bit.ly/2RXtUtU](https://bit.ly/2RXtUtU)

Life Skills Inventory: Independent Living Skills Assessment Tool – Washington State DSHS: [bit.ly/3xkA5XN](https://bit.ly/3xkA5XN)

Independent Living Skills Checklist – ESC3: [bit.ly/3vj52Kx](https://bit.ly/3vj52Kx)



800-869-6782 (toll free) | 703-923-0010 | 800-693-3514 (fax)

403 Holiday Ct, Suite 104, Warrenton, VA 20186

**VISIT US AT [WWW.PEATC.ORG](http://WWW.PEATC.ORG)**

Hablamos Español



The contents of this factsheet were developed under a grant from the Virginia Department of Education #H027A190107 and the US Department of Education, #H235F200001. However, those contents do not necessarily represent the policy of the US Department of Education, and you should not assume endorsement by the Federal Government. Project Officer: PEATC is not a legal services agency and cannot provide legal advice or legal representation. Any information contained in this training is not intended as legal advice and should not be used as a substitution for legal advice.

