



Individual Receiving Services: _____

Date: _____

The following questions are designed to assist the planning team in determining the needs and preferences of the individual when developing the ISP. Use the questions to start conversation about what the individual needs to do in order to be successful and self-determined throughout their lives and to help them think about their choices, decisions, and experiences that can help them build the future they desire.

	Yes/NO or NA	Details regarding the type of support needed or desired outcome:
Have you engaged in behavior that is injurious to yourself?		
Have you had incident of physical or verbal aggression towards others?		
Have you had inappropriate behavioral of sexual nature?		
Have you had behavioral expression resulting in property damage?		
Have you had elopement where absences raised reasonable concern for your safety?		
Have you participated activities that were illegal?		
Have you been hospitalized or sought hospitalization for behaviors that put yourself or others in danger?		
Are you prescribed behavioral control or psychotropic medications?		
Have you lost services (day services, employment, residential) because of behavioral problems?		