

Ansell-Casey Life Skills Assessment
Youth Short Assessment
(Version 4.0)

Instructions

These questions will ask you about what you know and can do. Do your best to answer all the questions.

I am: Female Male

My current age (years): _____

My grade in school:

- | | |
|---|---|
| <input type="checkbox"/> 1 st grade | <input type="checkbox"/> 2 nd grade |
| <input type="checkbox"/> 3 rd grade | <input type="checkbox"/> 4 th grade |
| <input type="checkbox"/> 5 th grade | <input type="checkbox"/> 6 th grade |
| <input type="checkbox"/> 7 th grade | <input type="checkbox"/> 8 th grade |
| <input type="checkbox"/> 9 th grade | <input type="checkbox"/> 10 th grade |
| <input type="checkbox"/> 11 th grade | <input type="checkbox"/> 12 th grade |
| <input type="checkbox"/> Trade school | <input type="checkbox"/> In college |
| <input type="checkbox"/> Not in school | <input type="checkbox"/> Other |
| <input type="checkbox"/> Working on GED | |

My primary race: *(Please mark only one)*

- American Indian or Alaskan Native

If you chose the box above, please enter the name of your tribe here:

- Asian Indian
- Black, African-American
- Chinese
- Filipino
- Guamanian or Chamorro
- Hispanic/Latino/Spanish

- Japanese
- Korean
- Native Hawaiian
- Other Asian
- Other Pacific Islander
- Other Race

If you chose the box above, please enter your race here: _____

- Samoan
- Vietnamese
- White

Which answer best describes your current living situation:

- On my own (alone or shared housing)
- With my birth (biological) parents
- With my birth (biological) mother or father
- With my adoptive parent(s)
- With my foster parent(s) who is/are unrelated to me
- With relatives (not foster care)
- With relatives who are also my foster parents
- In a group home or residential facility
- In a juvenile detention or corrections facility
- With a friend's family (not foster care)
- At a shelter or emergency housing
- With my spouse, or partner, or boyfriend or girlfriend
- Other

Knowledge & Behavior Items:

Please circle the number (1, 2 or 3) that describes you best:

| | Not like me | Somewhat like me | Very much like me |
|---|------------------------|-----------------------------|----------------------------------|
| 1. I can arrange for new telephone service and utilities (such as gas, water, electricity) | 1 | 2 | 3 |
| 2. I can complete a rental agreement or lease | 1 | 2 | 3 |
| 3. I can calculate the start-up costs for new living arrangements (for instance; rental deposits, rent, utilities, furnishings) | 1 | 2 | 3 |
| 4. I can explain how to prevent pregnancy | 1 | 2 | 3 |
| 5. I can explain two ways to prevent sexually transmitted diseases (STDs) such as HIV/AIDS and syphilis | 1 | 2 | 3 |
| 6. I can explain what happens to your body if you smoke or chew tobacco, drink alcohol, or use illegal drugs | 1 | 2 | 3 |
| 7. I can explain how I am feeling (like angry, happy, worried, or depressed) | 1 | 2 | 3 |
| 8. I get help if my feelings bother me | 1 | 2 | 3 |
| 9. I ask for help when I need it | 1 | 2 | 3 |
| 10. I am polite to others | 1 | 2 | 3 |
| 11. I show appreciation for things others do for me | 1 | 2 | 3 |
| 12. I respect other people's things | 1 | 2 | 3 |
| 13. I get my work done on time | 1 | 2 | 3 |
| 14. I get to school or work on time | 1 | 2 | 3 |
| 15. I prepare for exams and presentations | 1 | 2 | 3 |
| 16. I use things in the kitchen, like the microwave, electric mixer, and oven | 1 | 2 | 3 |
| 17. I fix meals for myself on my own | 1 | 2 | 3 |
| 18. I store food so it doesn't spoil or go bad | 1 | 2 | 3 |

| Not like me | Somewhat like me | Very much like me |
|----------------|---------------------|-------------------------|
|----------------|---------------------|-------------------------|

- | | | | |
|--|---|---|---|
| 19. I can turn on a computer | 1 | 2 | 3 |
| 20. I use a keyboard and a mouse with a computer | 1 | 2 | 3 |

Assessment Evaluation

I filled out this assessment (please mark all that apply):

- with an adult by myself with a friend

How did you like this assessment?

- I liked it It was OK I didn't like it

Additional Questions

This section is for use with questions provided by your school, agency or caregiver.

If no questions have been provided, you may stop here. Thank you.

| | A | B | C | D | E |
|-----|---|---|---|---|---|
| | | | | | |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |
| 7. | | | | | |
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| 9. | | | | | |
| 10. | | | | | |
| 11. | | | | | |
| 12. | | | | | |
| 13. | | | | | |
| 14. | | | | | |

| | | | | | |
|-----|--|--|--|--|--|
| 15. | | | | | |
| 16. | | | | | |
| 17. | | | | | |
| 18. | | | | | |
| 19. | | | | | |
| 20. | | | | | |