



**TRANSITIONAL**  
**LIVING.COM**

## **Independent Living Program**

### **Screening Interview Questionnaire**

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

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

#### **Section 1: Motivation and Goals**

1. **What motivated you to apply to this independent living program?**

\_\_\_\_\_

2. **What are the top three goals you hope to achieve during your time in this program?**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

3. **Where do you see yourself in one year?**

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#### **Section 2: Life Skills and Support Needs**

4. **On a scale from 1 to 5, how confident do you feel about managing your own budget?**

(1 = Not confident at all, 5 = Very confident)

\_\_\_\_\_

5. **What areas of independent living do you feel you need the most support in?**

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6. **Do you have any experience with cooking or meal preparation?**

Yes  No

If yes, please describe: \_\_\_\_\_

### **Section 3: Support System and Challenges**

7. **Who do you consider your biggest support in your life right now?**

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8. **Have you faced any significant challenges in the past that have impacted your ability to live independently?**

Yes  No

If yes, please explain: \_\_\_\_\_

9. **What strategies have helped you overcome challenges in the past?**

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### **Section 4: Expectations and Commitment**

10. **What are your expectations from this program?**

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11. **Are you willing to participate in mandatory workshops and meetings?**

Yes  No

12. **How do you handle conflict or disagreements with others?**

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