Your Quiz

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

1. What are you good at? (What are your strengths and abilities?)
2. What things are hard for you?
3. Do you have a disability?(circle one) YES NO
4. What do you like to do for fun?
5. Tell me about your family (I would love for you to draw a picture on the back)
6. What classes do you take at school?
7. What is your favorite?
8. Do you have a job? If so, what is it? What time do you work?