

Child/Student Assets Map

(Child Self Assessment)

Things to keep in mind:

- Why do we call them maps? We call them 'maps' because the information they produce can lead us somewhere new in our relationship with our child/children.
- If possible, interview your child at a time and in a place where you will not be interrupted.
- If your child would prefer to complete the survey independently, please try to provide a quiet time and place.
- Do not feel any pressure to complete the survey in one sitting. There is a suggested break between Parts I and II.
- If your child is having difficulty answering any question, please do not pressure her/him to find an answer. ***There is no need to answer all the questions.*** An unanswered question can tell us something important, too!
- **This is not a test!** No one is being graded! There are no right or wrong answers! **The survey should be fun!!!**
- If you have any questions about the survey, feel free to contact Scott at: Scott.Milne@yrdsb.edu.on.ca

1. What are your **two** (2) favourite things to do **at home**.

i)
ii)

2. How often do you do these things **at school**? (*check one box*)

Frequently **Sometimes** **Rarely** **Never**

3. What is your **least favourite** thing to do at home?

4. Name **one** (1) **new thing** you would like to do at home.

5. What are your **two** (2) favourite things to do **in the community** (*not at home or school*)?

i)
ii)

6. How often do you do these things **at school**? (*check one box*)

Frequently **Sometimes** **Rarely** **Never**

7. What is your **least favourite place** in the community?

8. Name **one** (1) **new thing** you would like to do in the community?

9. What are your **two** (2) favourite things to do *at school*?

i)
ii)

10. How often do you do these things *at school*? (*check one box*)

Frequently **Sometimes** **Rarely** **Never**

11. What is your **least favourite place** at school?

12. Name **one (1) new thing** you would like to do at school?

Suggested Break (End of Part I)

Part II

13. What **two** (2) things do you **like most** about yourself?

14. Name something you would like to change about yourself.

15. What **two** (2) things do **your friends** like most about you?

16. Name something your friends wish you would change.

17. What are **two** (2) things **your teachers** say they like about you?

18. Name something you think your teachers would like you to change.

19. What are **two** (2) things **your parents** like most about you?

20. Name one (1) thing your parents would like you to change

21. Name **something** your friends say that bothers you.

22. Name **something** your **teachers** say that bothers you.

23. Name **one thing** you hear at home that bothers you.

24. List **three** (3) things you think you'd like to be when you grow up.

i)
ii)
iii)

Thanks for completing the survey!!! 😊