

My Strengths/ What I enjoy



(think about what you can focus on to help support you in your education journey
E.g. *Technology, talking to people etc.*)

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I like to complete my work by

- Typing
- Writing
- Speaking/presenting
- Other

Details:

Areas that I may need support



(think about areas such as scribing, time management, organisation, understanding certain topics, communication etc.)

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Barriers to my success



(think about things that effect you
E.g. *physical access to information or spaces, capacity to complete certain tasks, confidence etc.*)

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What type of support works best for me



(Here you can list any strategies, technology or personal support that you have found best suits your needs)

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This information was completed by:		
Myself: <input type="checkbox"/>	Parent/Guardian/Carer: <input type="checkbox"/>	Medical Professional: <input type="checkbox"/>
Name:	Signature:	Date: