Let’s Talk About Independent Living

1. What does independent living mean to you?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. What programs, supports, and opportunities are you using now to further independent living?

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1. What programs, supports, and opportunities would help you achieve your independent living goals?

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1. Please list barriers you are currently experiencing that are making an impact on your ability to live independently.

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1. Please prioritize in order 1-10 in importance what you think is most important to you with 1 being most important.

\_\_\_\_\_Housing

\_\_\_\_\_Transportation

\_\_\_\_\_Assistive Technology

\_\_\_\_\_Personal Care Assistance

\_\_\_\_\_Home Modifications

\_\_\_\_\_Disaster Preparedness

\_\_\_\_\_Employment

\_\_\_\_\_Healthcare

\_\_\_\_\_Youth Leadership/Transitions

\_\_\_\_\_Nursing Home Transitions

1. Please provide any other comments you would like to share.

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Please provide your:

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

e-mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Thank you very much for participating in this questionnaire by providing your feedback which will be used in development of our next SPIL, Statewide Independent Living Plan for North Carolina.