

## Activities and Preferences Survey

Name of Participant \_\_\_\_\_

Date \_\_\_\_\_

Place a check in the box of all activities that you enjoy:

- |   |   |
|---|---|
| <input type="checkbox"/> Petting animals                        | <input type="checkbox"/> Caring for others                    |
| <input type="checkbox"/> Grooming animals                       | <input type="checkbox"/> Reading alone                        |
| <input type="checkbox"/> Viewing animals                        | <input type="checkbox"/> Reading to others                    |
| <input type="checkbox"/> Board games                            | <input type="checkbox"/> Watching children play               |
| <input type="checkbox"/> Active games                           | <input type="checkbox"/> Mechanical work                      |
| <input type="checkbox"/> Word games                             | <input type="checkbox"/> Electronic games                     |
| <input type="checkbox"/> Puzzles                                | <input type="checkbox"/> Computer surfing/exploration         |
| <input type="checkbox"/> Exercise: type _____                   | <input type="checkbox"/> Creative writing                     |
| <input type="checkbox"/> Exercise: type _____                   | <input type="checkbox"/> Diary writing                        |
| <input type="checkbox"/> Woodworking                            | <input type="checkbox"/> Speaking to a crowd                  |
| <input type="checkbox"/> Gardening                              | <input type="checkbox"/> Teaching others                      |
| <input type="checkbox"/> Crafts                                 | <input type="checkbox"/> Leading prayer                       |
| <input type="checkbox"/> Sewing                                 | <input type="checkbox"/> Teaching Bible lesson                |
| <input type="checkbox"/> Painting/Drawing                       | <input type="checkbox"/> Baking/cooking                       |
| <input type="checkbox"/> Coloring                               | <input type="checkbox"/> Telling stories                      |
| <input type="checkbox"/> Cleaning                               | <input type="checkbox"/> Watching TV                          |
| <input type="checkbox"/> Sitting/Relaxing                       |   |
| <input type="checkbox"/> Group discussions: interesting subject | <input type="checkbox"/> Painting                             |
| <input type="checkbox"/> Casual conversations with friends      | <input type="checkbox"/> Riding bikes                         |
| <input type="checkbox"/> Birdwatching                           | <input type="checkbox"/> Repairing                            |
| <input type="checkbox"/> Fishing                                | <input type="checkbox"/> Solving Problems                     |
| <input type="checkbox"/> Yard work                              | <input type="checkbox"/> Listening to others                  |
| <input type="checkbox"/> Building projects                      | <input type="checkbox"/> Offering advice                      |
| <input type="checkbox"/> Housework                              | <input type="checkbox"/> Beauty (hair, nails, makeup)         |
| <input type="checkbox"/> Needlework/Crochet/Knitting            | <input type="checkbox"/> Walking                              |
| <input type="checkbox"/> Card games                             | <input type="checkbox"/> Looking at pictures of myself/others |
| <input type="checkbox"/> Pool                                   | <input type="checkbox"/> Talking about good memories          |
| <input type="checkbox"/> Ping pong                              | <input type="checkbox"/> Sleeping/Napping                     |
| <input type="checkbox"/> Karaoke                                | <input type="checkbox"/> Other _____                          |
| <input type="checkbox"/> Singing for others                     | <input type="checkbox"/> Other _____                          |
| <input type="checkbox"/> Group games                            |   |

Place a check in the box of all environments that you enjoy:

- |  |   |
|--|---|
| <input type="checkbox"/> Outdoors                  | <input type="checkbox"/> Social events              |
| <input type="checkbox"/> Riding in vehicle         | <input type="checkbox"/> Community events           |
| <input type="checkbox"/> Restaurants               | <input type="checkbox"/> Senior Center              |
| <input type="checkbox"/> Shopping centers          | <input type="checkbox"/> Fitness Center             |
| <input type="checkbox"/> Movies/Theater            | <input type="checkbox"/> Beauty/Barber shops        |
| <input type="checkbox"/> Library                   | <input type="checkbox"/> Front porch/deck           |
| <input type="checkbox"/> Community centers         | <input type="checkbox"/> Friend's house             |
| <input type="checkbox"/> Local government meetings | <input type="checkbox"/> Family member's house      |
| <input type="checkbox"/> Local club meetings       | <input type="checkbox"/> Just Friends activity area |
| <input type="checkbox"/> Local religious meetings  | <input type="checkbox"/> Just Friends quiet room    |
| <input type="checkbox"/> Church services           | <input type="checkbox"/> Indoors                    |
| <input type="checkbox"/> Local fundraisers         | <input type="checkbox"/> Home                       |

Place a check in the box of all social situations you enjoy:

- Being alone
- Being with one or two people
- Being with groups
- Being in large crowds
- Being with friends
- Being with people I do not know
- Being with family
- Being around professionals
- Noisy places
- Quiet places

What is your favorite thing to do? \_\_\_\_\_

What is something you enjoy sharing with others about yourself and your abilities?  
\_\_\_\_\_