



YOUTH NAME:

1. My favorite snacks:

2. My favorite drinks:

3. My favorite candies:

4. My favorite desserts:

5. My favorite restaurants:

6. My favorite colors:

7. My hobbies- what I like to do in my free time:

8. Places I like to go for fun:

9. My favorite stores:

10. My favorite subjects and school supply

I feel appreciated and supported when (check all that apply 😊)

- When people compliment me
- When I receive notes and cards
- When people spend time with me
- When someone gifts me with an act of service- they do something nice for me “just because” (surprise clean my room, make me my favorite meal, bake my favorite cookies, wash my clothes, etc.)
- When I receive a gift or an award



PARENT/GUARDIAN NAME:

1. My favorite snacks:

2. My favorite drinks:

3. My favorite candies:

4. My favorite desserts:

5. My favorite restaurants:

6. My favorite colors:

7. My hobbies- what I like to do in my free time:

8. Places I like to go for fun:

9. Where I like to shop:

10. My favorite subjects and school supply

I feel appreciated and supported when (check all that apply 😊)

- When people compliment me
- When I receive notes and cards
- When people spend time with me
- When someone gifts me with an act of service- they do something nice for me “just because” (do the dishes, watch the kids, cook for me, run an errand, etc.)
- When I receive a gift or an award