**Housemate Compatibility Profile:** My Interest, Skills, & Habits Checklist

**Housemate’s name: Click here to enter name Parent/Guardian name:** Click here to enter text.

**Phone number:** Click here to enter text. **Email:** Click here to enter text.

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| **WHAT I LIKE TO DO!** | **Very** **much** | **Often** | **Sometimes** | **Not** **much** | **Never** |
| Talk and hang out with people |[ ] [ ] [ ] [ ] [ ]
| Communicate with people |[ ] [ ] [ ] [ ] [ ]
| Socialize with people |[ ] [ ] [ ] [ ] [ ]
| Reading |[ ] [ ] [ ] [ ] [ ]
| I like to have someone else read to me |[ ] [ ] [ ] [ ] [ ]
| I like to write |[ ] [ ] [ ] [ ] [ ]
| I like to keep a diary or journal |[ ] [ ] [ ] [ ] [ ]
| Meet new people |[ ] [ ] [ ] [ ] [ ]
| Visit with or contact people (family/friends) |[ ] [ ] [ ] [ ] [ ]
| Play a musical instrument |[ ] [ ] [ ] [ ] [ ]
| Listen to music |[ ] [ ] [ ] [ ] [ ]
| Hear live music |[ ] [ ] [ ] [ ] [ ]
| I like to sing |[ ] [ ] [ ] [ ] [ ]
| I like to dance |[ ] [ ] [ ] [ ] [ ]
| I like to tell jokes |[ ] [ ] [ ] [ ] [ ]
| I like magic tricks |[ ] [ ] [ ] [ ] [ ]
| I like live theatre (plays or musicals) |[ ] [ ] [ ] [ ] [ ]
| I enjoy going to the movies |[ ] [ ] [ ] [ ] [ ]
| Play computer games |[ ] [ ] [ ] [ ] [ ]
| Use a computer in general |[ ] [ ] [ ] [ ] [ ]
| Play board games or cards |[ ] [ ] [ ] [ ] [ ]
| I enjoy doing puzzles or crosswords |[ ] [ ] [ ] [ ] [ ]
| Participate in creative or artistic crafts |[ ] [ ] [ ] [ ] [ ]
| I like to draw |[ ] [ ] [ ] [ ] [ ]
| I like to paint |[ ] [ ] [ ] [ ] [ ]
| Take apart and/or build things  |[ ] [ ] [ ] [ ] [ ]
| Learn new things |[ ] [ ] [ ] [ ] [ ]
| Help teach other people new things |[ ] [ ] [ ] [ ] [ ]
| I like watching sports |[ ] [ ] [ ] [ ] [ ]
| I like playing sports |[ ] [ ] [ ] [ ] [ ]
| I like attending live sporting events |[ ] [ ] [ ] [ ] [ ]
| Be outside in the warm weather |[ ] [ ] [ ] [ ] [ ]
| Go outside in the Winter |[ ] [ ] [ ] [ ] [ ]
| Sit in the yard (in warm weather) |[ ] [ ] [ ] [ ] [ ]
| Help maintain a garden |[ ] [ ] [ ] [ ] [ ]
| Grow vegetables |[ ] [ ] [ ] [ ] [ ]
| Grow flowers |[ ] [ ] [ ] [ ] [ ]

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| **WHAT I LIKE TO DO!** continued | **Very much** | **Often** | **Sometimes** | **Not much** | **Never** |
| Go to the park |[ ] [ ] [ ] [ ] [ ]
| Be by the lake or near water |[ ] [ ] [ ] [ ] [ ]
| I like to swim |[ ] [ ] [ ] [ ] [ ]
| I enjoy water therapy or aqua fit |[ ] [ ] [ ] [ ] [ ]
| Go to the gym/stay fit |[ ] [ ] [ ] [ ] [ ]
| I would like to join a walking or running group i.e. Resilient Soles |[ ] [ ] [ ] [ ] [ ]
| I would like to join a fitness group i.e. BLAST |[ ] [ ] [ ] [ ] [ ]
| Help plan and organize a party/social event |[ ] [ ] [ ] [ ] [ ]
| Participate in community activities (e.g. Music festivals, Rib Fest, Canada Day, Fundraisers) |[ ] [ ] [ ] [ ] [ ]
| I enjoy cooking |[ ] [ ] [ ] [ ] [ ]
| I like to bake |[ ] [ ] [ ] [ ] [ ]
| I like animals |[ ] [ ] [ ] [ ] [ ]
| I like dogs/cats/birds/fish (Bold all that apply) |[ ] [ ] [ ] [ ] [ ]
| I like horses |[ ] [ ] [ ] [ ] [ ]
| I like reptiles (snakes, lizards etc.) |[ ] [ ] [ ] [ ] [ ]
| I like insects/bugs |[ ] [ ] [ ] [ ] [ ]
| I would enjoy pet therapy |[ ] [ ] [ ] [ ] [ ]
| I like being with people younger than me |[ ] [ ] [ ] [ ] [ ]
| I like being with people older than me |[ ] [ ] [ ] [ ] [ ]
| I prefer being around people my own age |[ ] [ ] [ ] [ ] [ ]
| I am comfortable speaking in public |[ ] [ ] [ ] [ ] [ ]
| Go for bicycle rides |[ ] [ ] [ ] [ ] [ ]
| Be taken for a ride/roll on my own special bike, tandem, wheelchair, assisted device. |[ ] [ ] [ ] [ ] [ ]

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| **Other skill or interests not listed:** Click here to enter text. |

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| **SLEEPING HABITS** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I like to stay up late |[ ] [ ] [ ] [ ] [ ]
| I like to get up early |[ ] [ ] [ ] [ ] [ ]
| I have a hard time getting up in the morning |[ ] [ ] [ ] [ ] [ ]
| I require assistance to get out of my bed |[ ] [ ] [ ] [ ] [ ]
| I require assistance to get into my bed |[ ] [ ] [ ] [ ] [ ]
| I prefer to rise and retire at the same time each day |[ ] [ ] [ ] [ ] [ ]
| I like to sleep in any chance I get |[ ] [ ] [ ] [ ] [ ]
| I enjoy sleeping in on weekends  |[ ] [ ] [ ] [ ] [ ]
| I go to bed early (before 8 or 9pm) |[ ] [ ] [ ] [ ] [ ]
| I need complete silence in order to fall asleep. |[ ] [ ] [ ] [ ] [ ]
| I can use earplugs if need be |[ ] [ ] [ ] [ ] [ ]
| I need total darkness in order to fall asleep |[ ] [ ] [ ] [ ] [ ]
| I can just about fall asleep anywhere |[ ] [ ] [ ] [ ] [ ]
| I am able to use an alarm clock to wake up |[ ] [ ] [ ] [ ] [ ]
| I can use my own mental clock to wake up |[ ] [ ] [ ] [ ] [ ]
| I can set my own alarm when I need to |[ ] [ ] [ ] [ ] [ ]
| I need someone to wake me up |[ ] [ ] [ ] [ ] [ ]
| I have a specific bed time routine |[ ] [ ] [ ] [ ] [ ]
| I snore when I sleep |[ ] [ ] [ ] [ ] [ ]
| I sleepwalk |[ ] [ ] [ ] [ ] [ ]
| I talk in my sleep |[ ] [ ] [ ] [ ] [ ]
| I have vivid dreams or nightmares |[ ] [ ] [ ] [ ] [ ]
| I need to use the bathroom during the night |[ ] [ ] [ ] [ ] [ ]
| I have a history of incontinence  |[ ] [ ] [ ] [ ] [ ]

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| **PERSONALITY TRAITS** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I worry about things |[ ] [ ] [ ] [ ] [ ]
| I have anxiety |[ ] [ ] [ ] [ ] [ ]
| I can be loud |[ ] [ ] [ ] [ ] [ ]
| I am energetic |[ ] [ ] [ ] [ ] [ ]
| I am very quiet |[ ] [ ] [ ] [ ] [ ]
| I am timid |[ ] [ ] [ ] [ ] [ ]
| I am slow to trust |[ ] [ ] [ ] [ ] [ ]
| I am shy |[ ] [ ] [ ] [ ] [ ]
| I am talkative |[ ] [ ] [ ] [ ] [ ]
| I am laidback  |[ ] [ ] [ ] [ ] [ ]
| I can be unmotivated |[ ]  [ ]   |[ ] [ ] [ ]
| I have strong opinions |[ ] [ ] [ ] [ ] [ ]
| I love attention |[ ] [ ] [ ] [ ] [ ]
| I get distracted easily |[ ] [ ] [ ] [ ] [ ]
| I may hurt myself |[ ] [ ] [ ] [ ] [ ]
| I can be aggressive |[ ] [ ] [ ] [ ] [ ]
| I am friendly |[ ] [ ] [ ] [ ] [ ]
| I am apologetic |[ ] [ ] [ ] [ ] [ ]
| I am considerate |[ ] [ ] [ ] [ ] [ ]
| I have good manners |[ ] [ ] [ ] [ ] [ ]
| I am polite |[ ] [ ] [ ] [ ] [ ]
| I am helpful |[ ] [ ] [ ] [ ] [ ]

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| **TV HABITS** | **I don’t****watch TV** | **Less than 1hr** | **1-2 hrs** | **2-4 hrs** | **4+ hrs** |
| I watch this much TV per day |[ ] [ ] [ ] [ ] [ ]

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|  | **On my own** | **With others** | **Only in the evening or on a movie night** | **During the day** | **Anytime is fine** |
| I prefer to watch TV |[ ] [ ] [ ] [ ] [ ]

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| **COMPUTER USE** | **Do not use a computer** | **Less than 1hr** | **1-2 hrs** | **2-4 hrs** | **4+ hrs** |
| I spend this much time on my computer per day |[ ] [ ] [ ] [ ] [ ]
| Social media (Facebook)/ gaming |[ ] [ ] [ ] [ ] [ ]

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| **I HAVE A JOB/VOLUNTEER**  | **Every day** | **3-4 days per week** | **1-2 days per week** | **Once every two weeks** | **Once a month** |
| I work/volunteer no |[ ] [ ] [ ] [ ] [ ]

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| **PUBLIC TRANSIT**  | **Independent use** | **With assistance** | **Can become independent with some coaching** | **Unable to take public transit** | **Use Handivan or other mode** |
| I am able to use the city bus |[ ] [ ] [ ] [ ] [ ]
| I am able to use the GO train |[ ] [ ] [ ] [ ] [ ]

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| **PERSONAL COMFORT**  | **20°C/****68°F** | **20-22°C/****68-71°F** | **23-25°C/****72-77°F** | **26-28°C/****78-84°F** | **I’m adaptable** |
| My ideal temperature range at any time of year is |[ ] [ ] [ ] [ ] [x]

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| **ALLERGIES** | **Certain Foods/****Scents** | **Pets** | **Seasonal** | **Medications** | **Insect/Other** |
| I have allergies to none known |[ ] [ ] [ ] [ ] [ ]

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| Please list all your allergies here: Click here to enter text. |

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| **PERSONAL STUFF/BELONGINGS** | **No problem** | **Often** | **If you ask me** | **Depends** | **Hate it** |
| Sharing or lending |[ ] [ ] [ ] [ ] [ ]

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| **SHARING A BATHROOM** | **No problem** | **Only with one person** | **If I have my own space** | **Prefer my own bathroom** | **Never** |
| Sharing a bathroom |[ ] [ ] [ ] [ ] [ ]

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| **LEVEL OF SUPPORT/ASSISTANCE** | **24 hour****support** | **6-8 hrs per day** | **2-5 hrs per day** | **A visit at some point each day** | **1-3 times per week** |
| I currently require |[ ] [ ] [ ] [ ] [ ]

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|  | **To eat** | **Personal hygiene** | **To get around** | **To transfer** | **To Dress** |
| I use a device for assistance |[ ] [ ] [ ] [ ] [ ]
| I require personal support |[ ] [ ] [ ] [ ] [ ]

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| **MEDICATIONS** | **Daily**(I need assistance) |  **Daily**(by myself) | **As required**(assisted) | **As required**(unaided) | **Not at this time** |
| I take medication |[ ] [ ] [ ] [ ] [ ]
| Please list here which ones and reason for? Click here to enter text. |

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| **HISTORY OF SEIZURES** | **Regularly**(3 or more times a month) | **Often**(1-2 times a month) | **Rarely**(once a year) | **Once in a while with certain triggers** | **Never** |
| I experience seizures |[ ] [ ] [ ] [ ] [ ]
| Please describe a typical seizure. (Any seizure protocol) Click here to enter text. |

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| **ONGOING CONTACT FROM PARENTS/CAREGIVER** | **Everyday** | **2-3 times a week** | **Once a week/ weekend** | **Every couple of weeks** | **Once a month is good/ Special Occasions** |
| I wish to see my family |[ ] [ ] [ ] [ ] [ ]
| I wish to speak to my family |[ ] [ ] [ ] [ ] [ ]
| I wish to see my friend(s) |[ ] [ ] [ ] [ ] [ ]
| I wish to speak to my friend(s) |[ ] [ ] [ ] [ ] [ ]

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| **PERSONAL SPACE** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I value time alone |[ ] [ ] [ ] [ ] [ ]
| I want to hang out with my housemates |[ ] [ ] [ ] [ ] [ ]
| I enjoy my own company |[ ] [ ] [ ] [ ] [ ]
| I would like a Best Buddy | **N/A** |[ ] [ ] [ ] [ ]

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| **RELIGIOUS VIEWS** (optional) | **Everyday** | **Often** | **Sometimes**(Special Holidays) | **Rarely** | **Never/****Not religious** |
| I practice my faith |[ ] [ ] [ ] [ ] [ ]

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| The faith I choose to practice is: Click here to enter text. |

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|  | **Any chance I get** | **Only if asked** | **Sometimes** | **With others of same faith** | **No, I keep them to myself** |
| I like to share my religious views |[ ] [ ] [ ] [ ] [x]

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| **MEAL TIME** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I like to eat at set times |[ ] [ ] [ ] [ ] [ ]
| I prefer to eat with the others |[ ] [ ] [ ] [ ] [ ]
| I prefer to eat on my own |[ ] [ ] [ ] [ ] [ ]
| I like to help prepare the meals |[ ] [ ] [ ] [ ] [ ]
| I enjoy eating out at restaurants |[ ] [ ] [ ] [ ] [ ]
| I can buy my own groceries |[ ] [ ] [ ] [ ] [ ]
| I have a special diet |[ ] [ ] [ ] [ ] [ ]

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| **HOUSEHOLD DUTIES** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I can do my own laundry |[ ] [ ] [ ] [ ] [ ]
| I can learn to do my laundry |[ ] [ ] [ ] [ ] [ ]
| I know how to use an iron |[ ] [ ] [ ] [ ] [ ]
| I can help with tidying the house |[ ] [ ] [ ] [ ] [ ]
| I can make my own bed |[ ] [ ] [ ] [ ] [ ]
| I can set the table |[ ] [ ] [ ] [ ] [ ]
| I can use the vacuum |[ ] [ ] [ ] [ ] [ ]
| I can sweep the floor |[ ] [ ] [ ] [ ] [ ]
| I like to clean |[ ] [ ] [ ] [ ] [ ]

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| **MONEY MATTERS** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I understand the concept of money  |[ ] [ ] [ ] [ ] [ ]
| I can make simple change |[ ] [ ] [ ] [ ] [ ]
| I do my own banking |[ ] [ ] [ ] [ ] [ ]
| I use a debit card/credit |[ ] [ ] [ ] [ ] [ ]
| I need help when shopping |[ ] [ ] [ ] [ ] [ ]
| I know how to budget my money |[ ] [ ] [ ] [ ] [ ]
| Someone else manages my money |[ ] [ ] [ ] [ ] [ ]

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| **COPING** | **All the time** | **Often** | **Sometimes** | **Rarely** | **Never** |
| I feel comfortable telling someone that I am upset or angry |[ ] [ ] [ ] [ ] [ ]
| I can lose my temper when upset |[ ] [ ] [ ] [ ] [ ]
| When I’m in a bad mood, I keep to myself |[ ] [ ] [ ] [ ] [ ]
| Like to talk about it |[ ] [ ] [ ] [ ] [ ]
| Prefer to be alone/need some time |[ ] [ ] [ ] [ ] [ ]
| Call my family or a friend |[ ] [ ] [ ] [ ] [ ]
| I can talk to a staff member |[ ] [ ] [ ] [ ] [ ]

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| **SMOKING HABITS** |
| I am a smoker |[ ]   | I never smoke |[ ]
| I don’t mind if someone else does |[ ]   | I can’t live with a smoker |[ ]
| I only smoke outside |[ ]   | I am trying to quit smoking |[ ]