# Grassroots Self-Advocate Worksheet

**Instructions: Download this worksheet and enter your answers for each question below. Send the completed worksheet back to us at** **NPAcomms@SourceAmerica.org** **and keep a copy for yourself to be used at training sessions and during the conference.**

**Name:**

**Home Address:**

**Home/Cell Number:**

**Name of Organization:**

**Supervisor Name / Email / Phone:**

## About You

What is your name and where are you from?

What are some things you like to do?

Have you served in the military?

## Life Before Getting Your AbilityOne Job

What was your life like before getting an AbilityOne job?

What are some barriers you have had to face to get to where you are?

## Life with Your AbilityOne Job

What does a typical day in your job look like?

What does your AbilityOne job mean to you?

What is your favorite part of your job?

How has having an AbilityOne job affected your daily life (in terms of routine, relationships, & responsibility)?

How has COVID-19 affected you personally and professionally?

## The Future

What do you wish people knew about employing people with disabilities?

What are some of your dreams and goals for the future?

