

Transition Plan

Self-Evaluation

The first thing to do when putting together your re-entry plan is to make a list of the services you will need.

A successful transition depends on making sure your basic needs are met. Since no one knows your needs better than you do, it's important to be very clear about what you'll need and what is available to you.

Here are 9 questions to help you get ready for your transition from incarceration to the community:

- 1) Who is picking you up, and where will you go?

- 2) When will you check in with probation or parole for the first time? How will you get there?

- 3) Where will you be staying? How long will you be able to stay there?

- 4) What services are most important for you to access? Do you know how to get these services?

- 5) How will you support yourself? What steps do you need to take to get a job or get financial help?

- 6) Who can you rely on for emotional support?

- 7) What will you do for fun?

- 8) What is your plan for staying clean and sober?

- 9) Which of these questions was the most challenging to answer, and which do you need to resolve first?

Transition Checklist

To start thinking about your needs, you can use this checklist as a starting point and reference sheet. Once you have a list, you can start planning how best to meet those needs.

Potential Needs	Notes/ Contact Information for Referrals
Identification <input type="checkbox"/> CA ID/Driver License <input type="checkbox"/> Social Security Card <input type="checkbox"/> Birth Certificate	
Housing <input type="checkbox"/> Shelter <input type="checkbox"/> Rental Deposit Assistance <input type="checkbox"/> Low Income Rental Housing <input type="checkbox"/> Substance Abuse Treatment / Sober Housing	
Basic Needs <input type="checkbox"/> Food <input type="checkbox"/> Clothing <input type="checkbox"/> Transportation <input type="checkbox"/> Communication (Phone, email, mailbox)	
Benefits <input type="checkbox"/> CalFresh (Food Stamps) <input type="checkbox"/> CalWORKS (TANF) or General Relief (GR) <input type="checkbox"/> Supplemental Security Income (SSI) <input type="checkbox"/> Social Security Benefits (SSA) <input type="checkbox"/> Veteran's Benefits	
Health / Wellness <input type="checkbox"/> Medical Insurance <input type="checkbox"/> Dental Services <input type="checkbox"/> Mental Health Services / Counseling <input type="checkbox"/> HIV/AIDS Services <input type="checkbox"/> Substance Abuse Services <input type="checkbox"/> Disability Services <input type="checkbox"/> Family Support <input type="checkbox"/> Pro-social activities	
Employment / Education <input type="checkbox"/> Job Training Programs <input type="checkbox"/> Certification Programs <input type="checkbox"/> Continuing Education (GED / Community College)	
Other <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	

My top 3 needs are: 1) _____ 2) _____ 3) _____