

Individual's Name: _____

Individual Rights

- Be treated nicely at all times and as a person
- Have a clean, safe place to live in and a place to be alone
- Have food that is good for you
- Be able to go, if you want, to any church, temple, mosque
- Be able to go to a doctor or dentist when you are sick
- Be able to have people help you with the way you walk, talk, do things with your hands, act or feel if you need it
- Be able to have people help and teach you, if you want
- Be able to have time and a place to go to be by yourself
- Be able to call, write letters or talk to anyone you want about what you want
- Be able to have your own things and be able to use them
- Be able to have men and women as friends
- Be able to join in activities and do things that will help you grow to be the best person you can be
- Be able to work and make money
- Be able to keep my own money and decide how to spend it and I can tell my staff if I feel someone has taken or used my money or possessions
- Be treated like everyone else
- Not be hit, yelled at, cursed at, or called names that hurt you
- Be able to learn new things, make friends, have activities, and go into the community
- Be able to tell people what you want and be part of making plans/ decisions about your life
- Be able to ask who you want to help you, let others know how you feel or what you want
- Be able to use your money to pay for things you need and want with help, if you need it
- Be able to say yes or no before people talk about what you do at work or home or look at your file
- Be able to complain or ask for changes if you don't like something without being afraid of getting in trouble
- Not be given medicine that you don't need or held down if you are not hurting anyone
- To vote and learn about laws and your community
- To say yes or no to being part of a study or experiment

_____ I have read the rights listed above

_____ I have had explained to me the rights listed above by (staff name) _____

_____ I have had the rights listed above explained with pictures by (staff name) _____

Signature & Date

Parent/ Legal Guardian Signature & Date

Witness Signature & Date

If you have questions or concerns about your rights, you may call Ohio Legal Rights Service's toll free at 1.800.282.9181, or the Ohio Department of DD Office of Consumer Affairs toll free at 1.800.228.5405, or Lake County Board of DD/Deepwood at 1.440.350.5100.