**Life/Work Planning**

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| --- | --- | --- | --- |
| Name |  | Year of Graduation |  |
| Address |  | School |  |
| Phone Number |  | Parent/Guardian |  |
| Date |  | Grade Level |  |

Goals for achievement

1. Set goals and plan action:

List your top five interests. List your top five skills.  
(see 1.A.1 and 1.A.8) (see 1.A.1 and 2.F.1)

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List five of your personality List your top work values.  
traits. (see 1.A.1) (see 1.A.1, 2.E.1, and 2.G.6)

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**Planning**

List your personal strengths recognized by List your ideal working conditions.

yourself and others. (see 2.D.6 and 2.G.1)

(see 1.A.1, 1.A.2, 1.A.7, and 1.B.4) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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List your strongest learning styles. (see 3.H.1)

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“Find something you love to do and you will never work a day in your life.”

Choose three long-term occupational goals and list the following information for each occupation. (see 3.I.2 and 3.I.3)

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| --- | --- | --- | --- |
| Occupation |  |  |  |
| Training and education routes |  |  |  |
| Program/training location |  |  |  |
| Entrance requirements (prerequisites, etc.) |  |  |  |
| Tuition fees/training costs per year |  |  |  |
| Reflect as to how interests, work values, skills, personality traits, individual strengths, and working conditions influence your life/work goals. |  |  |  |

List short-term occupational goals related to school (e.g., course selection for Grade 11, academic performance, participation in extracurricular activities related to future goals, attendance). (see 3.J.4)

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List short-term occupational goals related to activities outside school (e.g., find volunteer work or part-time work in related occupations, save money for post-secondary education, interview a person in an occupation of interest). (see 3.J.4) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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1. Four-Year Education Plan (see 3.J.4)

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| **Grade 9 Courses** | **Grade 10 Courses** | **Grade 11 Courses** | **Grade 12 Courses** |
| Completed | Compulsory | Compulsory | Compulsory |
| Optional | Optional | Optional |

This plan should be reviewed regularly and revised as needed. Teachers instructing this course should share the student’s Annual Education Plan with parent/guardians and request parent/guardian signatures and comments. The school should save a copy of this document for the student’s file and the student should retain the original in his/her portfolio.

Student’s Signature Date

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Parent/Guardian Signature Date

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Parent/Guardian Comments: