



A journey to graduation and beyond that includes the following:

- 1** An evaluation of student's weekly academic progress. Instruction is individualized, differentiated, and personalized to meet the needs of individual students.
- 2** A 9th through 12th-grade review of the student's classes, including core academic classes required for graduation and electives.
- 3** Out-of-class learning opportunities the student has pursued, such as job shadowing, participation in student organizations, clubs, athletics, and community service projects.
- 4** Completed ICAP requirements each year. The ICAP should include career assessment information each year.
- 5** The student's post-high school graduation plan should include plans to achieve an Associate's or Bachelor's degree, enter the armed forces, seek industry certification, find employment, etc.

Student Name:	Semester:	Fall	Spring
----------------------	------------------	-------------	---------------

Grade:	Date:
---------------	--------------

DIFFERENTIATED PERSONALIZED SERVICES

Explanation of Instruction/Service Received

One on One Tutoring	
Check in With Counselor	
Check in With Teacher	
Special Education Classroom	
Adjusted Hours	
Internships or Job Shadowing	



Circle all of the behaviors/feelings that are affecting your school performance:

- | | | |
|--------------------------|-------------------------|------------------------|
| Declining Grades | Absenteeism | Disruptive in Class |
| Lack of Motivation | Tardiness | Disrespectful |
| Wandering Around | Not Doing Personal Best | Sleeping in Class |
| Defiance | Cheating | Uncomfortable in Class |
| Negativity | Laziness | Faking Illness |
| Leaving School Early | Inattentive | Drug/Alcohol Use |
| Not Following Rules | Anxiety | Vaping |
| Unable to Meet Deadlines | Nervous About School | Low Self Esteem |
| Family Stress | Too Quiet | Tired |
| Employment Stress | Information Overload | Distracted |
| Too Noisy | Health | Other |

Circle all of the behaviors/feelings/abilities that are your strengths:

- | | | |
|----------------------------|--------------------------|----------------------------------|
| Reliable | Likes to Work in a Group | Likes To Read Aloud |
| Asks for Help | Prefers to be Inside | Reads with Expression |
| Prefers to Lead | Likes to Write | Focused |
| Prefers to Listen | Artistic | Kind |
| Prefers to Work w/ Your | Flexible | Prefers to Work on Many Subjects |
| Hands Prefers to Work | Gets Started Right Away | Prefers to Work on One Subject |
| Outside Follows Directions | Prefers to Work on | Likes English |
| Organized | Computer Honest | Likes History |
| Prefers Pen/Pencil & Paper | Likes to do Class | Likes Science |
| Makes Friends Easily | Presentations Loyal | Likes Art |
| Likes to Work by Myself | Responsible | Likes Math |
| Asks questions for | Funny | Other: |
| Clarification Creative | | |



My goals for overcoming these challenges, using my strengths, and accomplishing my school work:

SMART Goals	Accomplished?	Accomplished?	Date Achieved
	Yes	No	
	Yes	No	
	Yes	No	
	Yes	No	
	Yes	No	



Graduation Pacing Guide

Current Classes	Start Date	Estimated Completion Date	Completion Date



Individual Graduation Plan

Student Name: Date:

Grade: Semester: Fall Spring

Graduation Plan: College Prep | Core

_____ credits required for graduation. I have achieved _____ credits towards graduation.

Requirements:

Language Arts (4 Units)			Social Studies (3)		
English I			US History		
English II			US Government		
English III			OK History		
English IV			Other History		
Science (3 Units)			Fine Arts		
Biology I					
Chemistry					
Earth Science					
Environmental					
Science Physical			Business (2 Units College/1 Unit Core)		
Science Zoology			Computers I		
			Computers II		
Math (4 Units)			Foreign Language		
Algebra I			Foreign Language		
Algebra II					
Geometry			Additional Credit (College)		
Math of Finance					
Trigonometry / Pre					
Calculus			Electives		
			PFL		



Additional Graduation Requirements

Oklahoma Promise Enrolled: 8th 9th 10th 11th	Yes	No	Date Completed:	
CPR - AED	Yes	No	Date Completed:	
FAFSA	Yes	No	Date Completed:	
NCAA Eligibility	Yes	No	Date Completed:	
ACT / SAT	Yes	No	Date Completed:	
CCRT - Science	Yes	No	Date Completed:	
CCRT - History	Yes	No	Date Completed:	
Citizenship	Yes	No	Date Completed:	
PLAN (Pre ACT)	Yes	No	Date Completed:	
Work Keys	Yes	No	Date Completed:	
ASVAB	Yes	No	Date Completed:	



Student Name: _____ **Date:** _____

Grade: _____ **Semester:** **Fall** **Spring**

	9th Grade	10th Grade	11th Grade	12th Grade
Extra-Curricular Activities				
Employment				
Community Service				
Internship Job Shadow Mentorship				



Post Secondary Planning and Career Placement

Student Name:	Date:
----------------------	--------------

Grade:	Semester: Fall Spring
---------------	---------------------------------

Career Cluster

Career Interest Inventory

Career Goal

Post Secondary Plan

College 2 YR or 4 YR	Applied: YES NO	Major: School:
Career Tech	Applied: YES NO	Program: School:
Trade School	Applied: YES NO	Program: School:
Armed Forces	Applied: YES NO	Branch:
Work	Applied: YES NO	Location:
Other		