

Personal Learning Plan

Name: _____

Class of: _____

School: _____

Career Field: _____

Date: _____

Period: _____

Career Cluster: _____

Postsecondary Goals: _____

Associate's or Other Degree Program OR Bachelor's & Graduate Degree **Program in:** _____

High School Schedule

	Grade 9	Grade 10	Grade 11	Grade 12
English				
Math				
Science				
Social Studies				
Other:				
Career Education	EXPLORE test	PLAN and/or PSAT	ASVAB; and/or PSAT; ACT; SAT	ACT and/or SAT; or other (e.g., COPS)

Extended Learning: _____

**Extra curricular
And Community Activities:** _____