

ODE Student Success Plan

Name		Student ID	
Address		Household Phone	
		Other Phone	
School			

Current Courses

Course #	Course Name	Credit Type	Term Grades			
			Q1	Q2	Q3	Q4

Additional Failed Courses to Recover

Course #	Course Name	Credit Type	
Recovery Plan			
Course #	Course Name	Credit Type	
Recovery Plan			
Course #	Course Name	Credit Type	
Recovery Plan			
Course #	Course Name	Credit Type	
Recovery Plan			
Course #	Course Name	Credit Type	
Recovery Plan			

Counselor Name

Phone

Counselor Email

Other Team Members

What has worked well for you? What are your strengths?

What are your greatest challenges for completing the courses above?

What supports do you need to complete the above courses?

What will you do to make sure you are successful in completing your courses?

Who is on your support team?

Graduation Test Scores

English 9 English 10 Math I Math II Biology / Physical Science

American History American Government

Plan to prepare for needed tests:

Plan to retake tests:

Testing Pathway:

EOC Exam

ACT / SAT

CTE

Testing Pathway Notes:

Post Secondary Planning

(complete items relative to the student)

After high school I plan to:

Attend a 2/4 year post-secondary institution full time

Attend a technical school full time

Work part-time and attend school

Enter the military as a career

Work full time

1) What are your career goals?

2) What interests, skills and knowledge support your career goals?

3) What high school courses will you take to reach your goals?

4) What do you plan to do after high school to reach your goals?

5) What activities and skill training will you need to learn outside of school to reach your career goals?

6) What internships have you pursued or plan to pursue?

7) What degree, certification, licensure or specialized training will you need for your chosen career?

8) Has your career goals changed since last year?

9) What other career goals and educational plans have you considered as a second choice?

Career Exploration Activities

Use this activity to record experiences that relate to your career goal or to identify those experiences you would like to have. As you write a brief description in the appropriate space, indicate whether it is a goal or an actual experience.

Exploration: Research, Workplace Visit with Interview, Job Shadowing, etc.

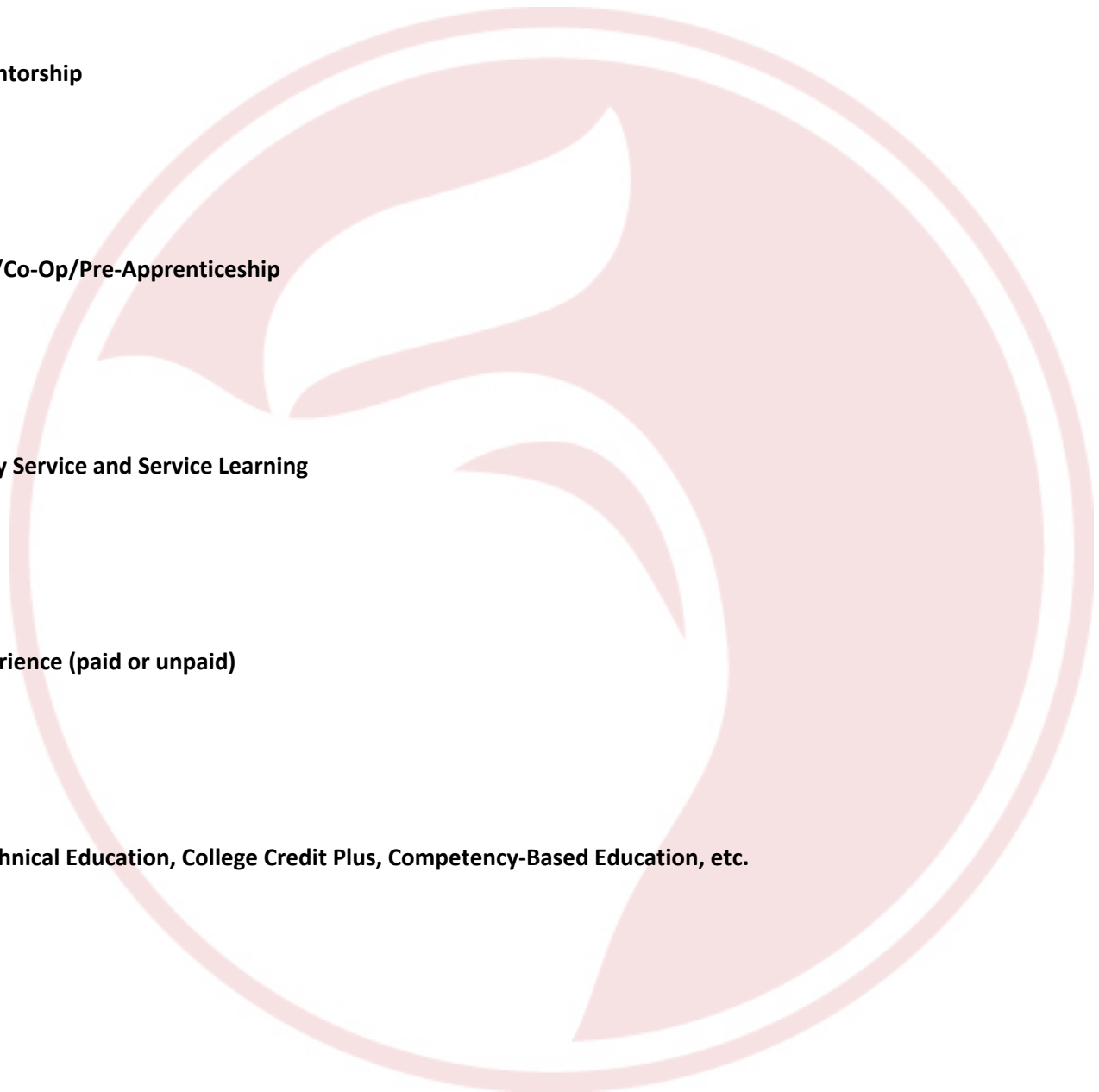
Career Mentorship

Internship/Co-Op/Pre-Apprenticeship

Community Service and Service Learning

Work Experience (paid or unpaid)

Career-Technical Education, College Credit Plus, Competency-Based Education, etc.



Planning Checklist

Use this checklist to help ensure that you have gained the knowledge, information and skills necessary to develop and maintain your education plans and career goals. When you demonstrate specific skills, you will check the box next to them. Provide comments, as appropriate, to document your

I know and can describe my interests and work traits.

Comments:

I know and can describe my academic strengths.

Comments:

I know how to locate and use career information resources.

Comments:

I can describe the educational options available to me.

Comments:

I know the high school graduation requirements.

Comments:

I know the educational requirements to reach my chosen career goal

Comments:

I understand labor market trends for my chosen career goals

Comments:

I have discussed my educational plans & career goals with my parent/guardian & counselor/teacher

Comments:

I can locate and identify local job opportunities.

Comments:

I can identify nontraditional career options.

Comments:

I know how to navigate and complete college applications.

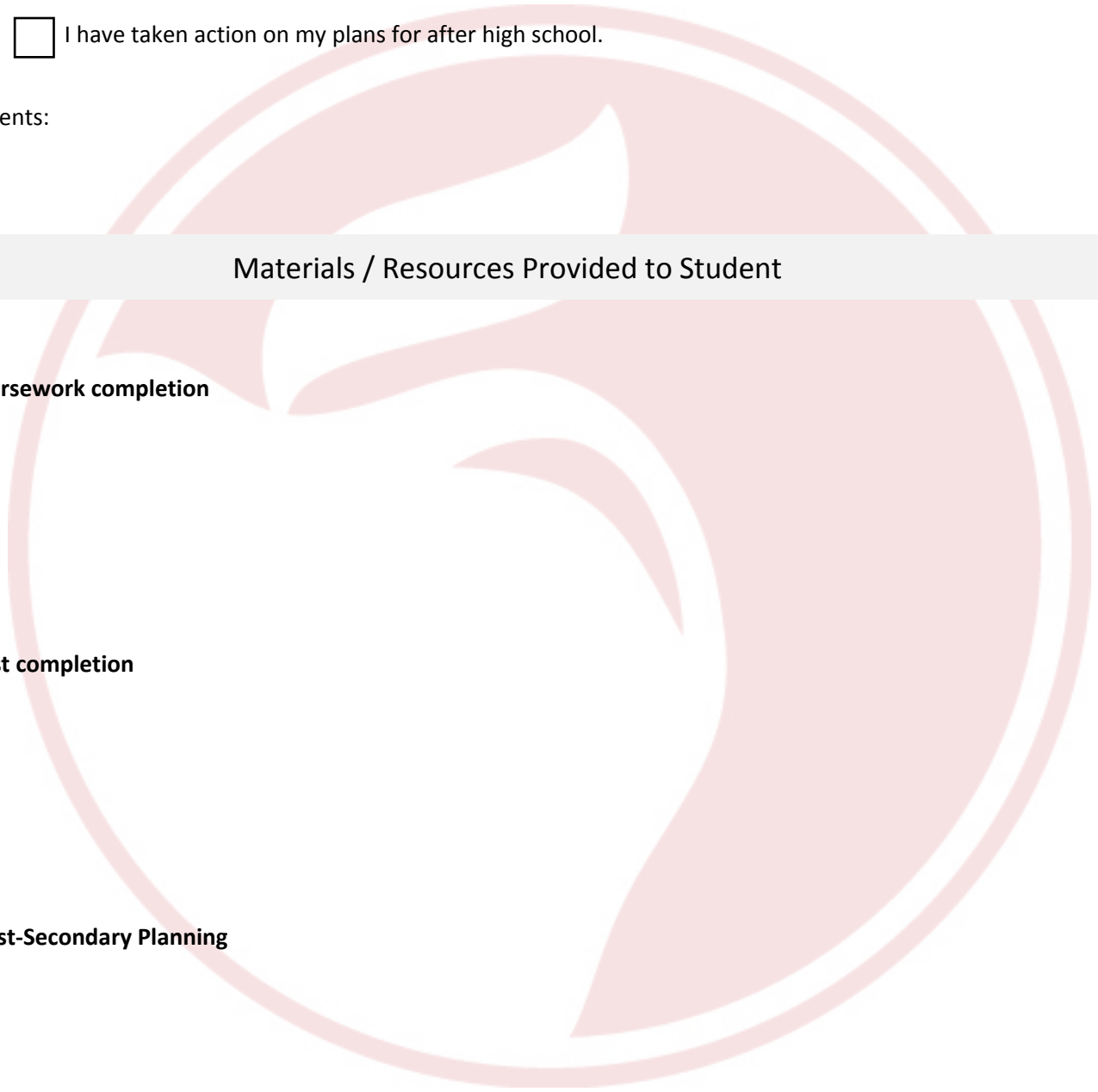
Comments:

I have discussed my plans for after high school with my parent/guardian and counselor/teacher

Comments:

I have taken action on my plans for after high school.

Comments:



Materials / Resources Provided to Student

For coursework completion

For test completion

For Post-Secondary Planning

Interventions Assigned

College / Career Activities	Assigned	In Progress	Completed
Learning Style Inventory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do What You Are	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strengths Explorer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goal Setting (Current)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Career Interest Profiler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Career Cluster Finder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
College Match	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MI Advantage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Planner (Infinite Campus)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
College Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Survey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FAFSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Interventions

Intervention

Comments

Intervention

Comments

Intervention

Comments

