

Transition Plan

Name of student: _____

Next destination: _____

Student's educational goal(s)	Methods to achieve goal(s)
<input type="checkbox"/> Earn a credit(s) <input type="checkbox"/> Earn OSSC <input type="checkbox"/> Earn OSSD <input type="checkbox"/> Enter college/university <input type="checkbox"/> Enter apprenticeship/trades <input type="checkbox"/> Enter the workforce <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Other (specify) _____	<ul style="list-style-type: none"> • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____
Student's personal goal(s)	Methods to achieve goal(s)
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<ul style="list-style-type: none"> • _____ • _____ • _____ • _____ • _____
Description of student's post-SAL program	
Courses and other learning activities:	Details:

Plan to assist the student in the transition		
Action:	Responsibility:	Timeline:
Action:	Responsibility:	Timeline:
Action:	Responsibility:	Timeline:
Action:	Responsibility:	Timeline:

Signatures

Principal

Date

I have been consulted in the creation of the transition plan.

Student

Date

I have been consulted in the creation of the transition plan.

Parent

Date