



Individual Career Plan

Name		Date
Last	First	MI

General Information

What is your immediate goal at this time?

- | | |
|---|--|
| <input type="checkbox"/> to obtain GED | <input type="checkbox"/> to attend college |
| <input type="checkbox"/> upgrade skills for job advancement | <input type="checkbox"/> other |

If you would like to attend college, what course of study are you interested in?

Have you at one time been enrolled in a college or college-like training program (CDL, Beauty School, etc.)?

- Yes No

Please list previous schools:

Did you complete any type of certificate or degree in a college or college-like training program (CDL, Beauty School, etc.)?

- Yes No What? _____

If you have attended a previous school, did you apply for financial aid? Yes No

If yes, what financial aid did you receive (Pell Grant, Loan, etc.)?

Financial Aid

- | | | |
|---|------------------------------|-----------------------------|
| Are you on financial aid suspension? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you on academic suspension? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you in default on a student loan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you currently in deferment or applied for a student loan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

What are your career goals? _____

What can Career Pathways do to help you through your "career journey" you are about to start? (Please be specific) _____

Assistance Needed

Childcare Transportation Tuition Books Other (uniform, tools, screening fees)

Family Profile

Married Single Divorced Separated Widowed

Living Arrangements:

Have you had any felony convictions? Yes No

If yes, Date _____ Reason _____

What would you say your family "strengths" are? _____

What would you say your family's "concerns" are? _____

What is your "ultimate" family goal? _____

Could you/your family benefit from the following services? (Please check those that apply)

- Improved family relationships
- How to be better parent(s)
- Household budgeting skills
- Single Parent Scholarship
- Making your money work
- IDA (Individual Dev Acct) Program

Employment History (can include paid and unpaid employment, internships, etc.)

Are you currently employed? Yes No Number of hours worked per week_____

Will your current work schedule allow you to attend and complete the scheduled classes?

Yes No

Do you want assistance finding a job that will work with your class schedule?

Yes No

Present or Last Position:

Employer_____

Address_____

Supervisor_____

Phone_____

Position Title_____

From_____ To_____

Salary_____

Reason for leaving_____

Previous Position:

Employer_____

Address_____

Supervisor_____

Phone_____

Position Title_____

From_____ To_____

Salary_____

Reason for leaving_____

Previous Position:

Employer_____

Address_____

Supervisor_____

Phone_____

Position Title_____

From_____ To_____

Salary_____

Reason for leaving_____

Assessment Information

Transfer Student: _____

COMPASS Reading _____ Developmental required _____
ACT Pre/Algebra _____ Developmental required _____
Scores: English _____ Developmental required _____

TABE scores: Reading _____ Grade level equivalency _____
Math _____ Grade level equivalency _____
Language _____ Grade level equivalency _____

Kuder results: Career Search _____
Work Skills _____
Work Values _____

Point of Entry to the Career Pathways Program

- ESL
- Adult Basic Education
- GED
- WAGE/Employability Programs
- Developmental or Remedial Educ.
- College credit courses
- Modular courses

Career Specific

- Health Science
- Business & Administration
- Education & Training
- Manufacturing
- Other _____
(please list)

Degree Plan _____

Special needs related to learning/ADA concerns _____

Additional observations from personal interview (student's abilities, preferences, interests, motivations, etc.) _____

Signature: _____ Date: _____