

NEW YORK STATE EDUCATION DEPARTMENT

**Career Plan**  
*Commencement Level*

**1. Personal Data**

Name: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

School: \_\_\_\_\_

**2. Review of Student Career Plan**

| Grade Level: | Date of Review: | Possible Participants (Initials) |                      |          |            |        |
|--------------|-----------------|----------------------------------|----------------------|----------|------------|--------|
|              |                 | Student:                         | Parent/<br>Guardian: | Teacher: | Counselor: | Other: |
|              |                 |                                  |                      |          |            |        |
|              |                 |                                  |                      |          |            |        |
|              |                 |                                  |                      |          |            |        |
|              |                 |                                  |                      |          |            |        |

**3. Knowledge**

**A. Self-knowledge: Who am I?**

**Interests:** List your top three choices for each of the following areas of interest:

| Grade Level: | 1a. Personal: <i>Out-of-school activities that you enjoy</i> | 1b. Academic: <i>Classes or subjects you enjoy the most</i> | 1c. Work Preferences: <i>Working with people, ideas, and things</i> |
|--------------|--------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------------|
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**2. Abilities:** *List personal skills and talents that will be helpful in a career choice:*

| <b>Grade Level:</b> | <b>My Personal Abilities . . .</b> | <b>Career areas where my abilities will be useful . . .</b> |
|---------------------|------------------------------------|-------------------------------------------------------------|
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**Personal and academic areas I need to strengthen:**

| <b>Grade Level:</b> | <b>I need to strengthen . . .</b> | <b>Steps I will take to strengthen these areas . . .</b> |
|---------------------|-----------------------------------|----------------------------------------------------------|
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**B. Career Exploration:** *Where am I going?*

**1. School and/or Community Experiences:** *I have participated in the following school and/or community experiences:*

| <b>Grade Level:</b> | <b>School and/or Community Experiences:</b> | <b>Skills Acquired Through Experience:</b> |
|---------------------|---------------------------------------------|--------------------------------------------|
|                     |                                             |                                            |
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|                     |                                             |                                            |

**2. Work Experiences:** *I have participated in the following work experiences:*

| <b>Grade Level:</b> | <b>Work Experiences:</b> | <b>Skills Acquired Through Work Experience:</b> |
|---------------------|--------------------------|-------------------------------------------------|
|                     |                          |                                                 |
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3. **Careers of Interest and Characteristics:** *I am interested in the following careers and have discovered the following information about these careers:*

| Grade Level: | Careers of Interest: | Education Requirements: | Skills I Need to Acquire: | Work Environment: | Job Outlook: |
|--------------|----------------------|-------------------------|---------------------------|-------------------|--------------|
|              |                      |                         |                           |                   |              |
|              |                      |                         |                           |                   |              |
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C. **Future Goals and Decision-Making:** *How do I get there?*

1. **Career Goals and Action Steps:**

| Grade Level: | Goals:<br><i>(resulting from career exploration activities)</i> | Education Plan:<br><i>(courses that relate to my career interests)</i> | Action Steps:<br><i>(what I need to do to accomplish my goals)</i> | Check Off Completed Steps |
|--------------|-----------------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------|---------------------------|
|              |                                                                 |                                                                        |                                                                    |                           |
|              |                                                                 |                                                                        |                                                                    |                           |
|              |                                                                 |                                                                        |                                                                    |                           |
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4. **Skills/Application:** *What do I need to know? What skills are important to me? What am I learning? Why am I learning it? How can I use it?*

**Directions:** *The following skills are needed to succeed in life, work, and education beyond high school. Using the scale provided, identify for each skill the level of achievement **you believe** you possess at the beginning of the commencement level and the level **you believe** you achieved by the end of your senior year. Briefly describe a classroom experience or an activity that helped you develop each skill and identify how each skill can be used in your life and future work experiences.*

| Skills:                                                                                                                                                                                                                                 | <u>Beginning Skill Level I Possess</u><br>(Check Off)                                                                                                              | Experiences/Activities/Application: | <u>Final Skill Level I Have Achieved</u><br>(Check Off)                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic Skills:</b> Uses a combination of techniques to read, listen to, and analyze complex information; conveys information in oral and written form; uses multiple computational skills to analyze and solve mathematical problems. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Highly ↔ Least Developed Developed |                                     | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Highly ↔ Least Developed Developed |
| <b>Thinking Skills:</b> Demonstrates the ability to organize and process information and apply skills in new ways.                                                                                                                      | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Highly ↔ Least Developed Developed |                                     | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Highly ↔ Least Developed Developed |

| <b>Skills:</b>                                                                                                                                                    | <b>Beginning Skill Level I Possess (Check Off)</b>                                                                                                                        | <b>Experiences/Activities/Application:</b> | <b>Final Skill Level I Have Achieved (Check Off)</b>                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Personal Qualities:</b> Demonstrates skills in setting goals, monitoring progress, and improving performance.                                                  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |                                            | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |
| <b>Interpersonal Skills:</b> Communicates effectively and helps others to learn a new skill.                                                                      | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |                                            | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |
| <b>Technology:</b> Applies knowledge of technology to identify and solve problems.                                                                                | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |                                            | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |
| <b>Managing Information:</b> Uses technology to acquire, analyze and organize data, and communicates information.                                                 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |                                            | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |
| <b>Managing Resources:</b> Allocates time and financial and human resources to complete a task.                                                                   | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |                                            | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |
| <b>Systems:</b> Demonstrates an understanding of the relationship between the performance of a system and the goals, resources, and functions of an organization. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |                                            | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br><i>Highly ↔ Least Developed Developed</i> |

## 5. Culminating Activity

**Directions:** *Briefly describe the activity that you completed. Indicate the most important thing you learned about yourself through this activity. Describe how this self knowledge will influence your plans for the future.*

| <b>Activity:</b> | <b>Self Knowledge/Future Plans:</b> |
|------------------|-------------------------------------|
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