



A partner in **GTWORKS**  
Great Training. Great Work.

# Personal Learning & Career Plan PLCP

## For:

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

Age: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Tier Level (Circle): I II III IV

### INSTRUCTIONS:

Using the information received from the three tools in the *CWP Career Competency System*:

***The Competency Learning Plan***


***Personal Development Profile***


***The Career Interest Inventory***

Complete the information under each of the following categories to formulate goals for this program year. This PLCP should be referred to throughout the duration of the program. Update your goals as you achieve them! This PLCP should be reviewed and updated every month.

Please  when you have completed your goal!

**PERSONAL DEVELOPMENT GOALS:**

TWO priority <i>EXTERNAL</i> assets to work on:	What is your plan for helping yourself with this?	
1.		
2.		

TWO priority <i>INTERNAL</i> assets to work on:	What is your plan for helping yourself with this?	
1.		
2.		

**CAREER INTEREST GOALS:**

Career that interests you most:	Which desired work values does this career offer?	What abilities do you have that would be good for this career?	What school subjects are important for this career preparation?
1.	1.  2.  3.	1.  2.  3.	1.  2.  3.

Which career will you use for your *Dream Resume*? \_\_\_\_\_  
 (Tiers I & II only)

 Date Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

**What is your plan for focusing on and/or improving in school subjects related to your career choices?**

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**Who will help you with your plan for school subject focus and/or improvement?**

1. \_\_\_\_\_ Relationship to you? \_\_\_\_\_

2. \_\_\_\_\_ Relationship to you? \_\_\_\_\_

**Did you talk to these people and ask for help?** \_\_\_\_\_ 

**What are three things you should do now to address the educational requirements for your career choices?** (Please see the attached career education checklist and timeline).

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_


**WHO do you plan to talk to about your career choices? WHEN will you do this?**

WHO?

WHEN?

1. \_\_\_\_\_

2. \_\_\_\_\_

**Did you talk to these people and ask for help?** \_\_\_\_\_ 

**COMPETENCY LEARNING PLAN GOALS:**

Please choose at least one basic skills goal (if deficient) and three additional competencies that you will focus on for this program year. Describe how you plan to achieve the selected competencies and *why* these competencies are important for your career choices.

Competency	Why is this competency important to your career goal?	<input checked="" type="checkbox"/> <sup>1</sup>
1.		
2.		
3.		

\*\*\*\*\*

**AGREEMENT:**

*By signing this PLCP I agree to do my best to achieve these goals that I have developed with the help of an adult. I understand that no one but **me** can achieve these goals, but that I am allowed to ask for help and **should** ask for help. I understand that the achievement of these goals is important for my future. I also understand that I can change my goals from year to year and that the most important thing for my success is **to always have goals.***

**Student Signature:** \_\_\_\_\_

**Instructor/Facilitator Signature:** \_\_\_\_\_

**Program Name:** \_\_\_\_\_

**Date Signed:** \_\_\_\_/\_\_\_\_/\_\_\_\_

<sup>1</sup> Check when competent according to your learning plan.