Personalized Learning Plan (PLP) – Middle School Level

This document is designed to help students create and achieve personal, academic, and career goals.

A. STUDENT INFORMATION

Student Name:_____ **Grade:**_____

Date: _____ **LPP Support Person :** _____

Whom do your currently live with:_____

B. PERSONAL GOAL SETTING (Social, emotional, relational, etc.)

1. **What do you do well (things you feel you are great at)?** _____
   _____

2. **Is there a person that you wish to be like (a role model)? If so, who is it and what makes this person a good role model?**
   _____

3. **If you have a problem where you need some support, to whom would you go?**
   _____

4. **What behavior would you like to improve?**

C. ACADEMIC GOAL SETTING (Ex. Grades, Attendance)

1. **Circle your favorite subject?** Math   Science   English   Social Studies   Spanish   PE   FACS
   Tech   Music   Art   Health   Library **Why?** _____

2. **Circle your least favorite subject?** Math   Science   English   Social Studies   Spanish   PE   FACS
   Tech   Music   Art   Health   Library **Why?** _____

3. **If you could change anything about school, what would it be?** _____
   _____

1. **Choose one *subject* where you would like to improve during the first semester.**_____

2. **Circle at least one area that would support improvement in the subject you chose.**
   Organization   Study skills   Attendance   Homework   Bring home and return school materials
   Achieve merit roll   Achieve honor roll   Classroom behavior   Other

3. **Assess virtual skills: Zoom, school email, google account, google classroom.**
   _____
   _____

1. **What are you involved in outside of school?** _____
   _____

2. **What do you like to do when you have free time?** _____
   _____

3. **Would you enjoy working alone or working with people? Circle one.**

   Working alone   Working with people

I am interested in developing a better understanding of the opportunities available to me after high school graduation. Circle the ones that you are interested in. (7th and 8th grade only)

Community College   Four year college/university   Trade School   Military   Work

1. **If a friend or family member were to describe you, what would they say?**
   _____
   _____

Student Signature: _____   **Date:** _____

LPP Staff Signature: _____   **Date:** _____

Parent Signature: _____   **Date:** _____