**STUDENT ACTION PLAN**

 **Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_**

**CURRENT LEVEL OF FUNCTIONING (include Strengths and Weaknesses)**

These should encompass Social, Emotional, Academic, Career, and Behavioral

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**Measurable Long term and Short term S.M.A.R.T. Academic Goals**

**S**pecific, **M**easurable, **A**ttainable, **R**elevant, **T**imely

 **LONG TERM:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **LONG TERM:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **SHORT TERM GOALS and How Measured: ASSESSEMENT REVIEW**

 **(assessment intervals are 9wks.)**

 **Q1 Q2 Q3 Q4**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**BEHAVIORAL INTERVENTIONS & MEASURABLE GOALS**

(To be reviewed during each grading period student is in the ALE)

 **Intervention and how measurements will occur: Assessment Review**

 **Q1 Q2 Q3 Q4**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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  **ALE PLACEMENT TEAM \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_**

 **MEETING DATE**

 **Name Position:**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL ADMINISTRATOR**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL COUNSELOR
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CLASSROOM TEACHER (Current Educator Assigned to Student)
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT OR GUARDIAN
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ALE REPRESENTATIVE
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 504, SPED, External Support, Probation Officer, Relative, etc.**

**ACADEMIC OPPORTUNITY ACADEMY**

**SENIOR TRANSITION/EXIT FORM**

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

DATE

**Checklist:** To be completed before seniors’ last day

|  |  |
| --- | --- |
| **College Bound** | **Work Force** |
| * Submitted at least 2 college applications by Christmas
 | * Completed at least 2 applications
 |
| * All required paperwork submitted
 | * Completed Resume
 |
| * ACT
 | * 2 Reference Letters/Contacts
 |
| * FAFSA application
 |  |
| * AR Challenge Scholarship
 |  |
| * Completed Resume
 | **Military Assignment** |
| * Applied for at least 2 local scholarships
 | * Branch:
 |

 To be completed or obtained before graduation.

|  |
| --- |
| **Personal/School Related** |
| * Copy of Birth Certificate
 |
| * Social Security Card
 |
| * Driver’s Permit/License
 |
| * Health Insurance Card
 |
| * Checking/Savings Acct
 |
| * Completed Voter Registration
 |
| * Selective Service- males, 18 yrs
 |
| * Thank You Letter
 |
| * All Fines Paid
 |
| * All Books Returned
 |

\*You will receive one official copy of your transcript upon completion of high school. Other copies can be obtained through the high school office.

**Student’s Future Goals/Objectives:** (Write a brief description of the students’ short term and long term plans/goals/objectives for the future. Include in this higher education, work/career path, or military branch.)

|  |
| --- |
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After reviewing the student’s goals and completion of the transition/exit form, the team agrees that the student has adequately fulfilled the criteria and goals set for him/her and is ready to exit County Line School District.

**AOA TRANSITION TEAM**

 **Name Position Name Position**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT OR GUARDIAN** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SCHOOL ADMINISTRATOR**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL COUNSELOR**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **AOA REPRESENTATIVE** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **OTHER PERSONNEL**

**Additional Contact Information:**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact (other than self): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation: \_\_\_\_\_\_\_\_**

**Phone #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_ Relation:** \_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you have any of the following social media?**

|  |
| --- |
| **Social Media** |
| Image result for twitter icon | Yes No |  |
| Image result for instagram icon | Yes No |  |
| Image result for snapchat icon | Yes No |  |
| Image result for facebook icon | Yes No |  |

**Would you be interested in adding your name to an AOA Alumni Group? Yes No**