Personalized Learning Plan (PLP) – Middle School Level

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

A. STUDENT INFORMATION

Student Name: ____________________  Grade: __________  Student ID#: __________

Date: ____________________  PLP Support Person: ____________________

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

1. What do you do well (things that you feel you are great at)?
   ___________________________________________
   ____________________________________________________________________________________
   ____________________________________________________________________________________

2. What would you like to improve about yourself (be better at)?
   ___________________________________________
   ____________________________________________________________________________________
   ____________________________________________________________________________________

3. Is there a person that you wish to be like (a role model)? If so, who and what makes this person a good role model?
   ___________________________________________
   ____________________________________________________________________________________
   ____________________________________________________________________________________

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

1. What is your favorite subject?  Why? ___________________________
   ____________________________________________________________________________________

2. What is your least favorite subject?  Why? ___________________________
   ____________________________________________________________________________________

3. If you could change anything about school, what would it be? ___________________________
   ____________________________________________________________________________________

1. What do you want to accomplish?

2. List two next steps:
   a. ___________________________
   b. ___________________________

3. Who can support you and how?

   Target date for goal accomplishment: _______  Date(s) of goal status review: _______
1. What do you want to accomplish?

2. List two next steps:
   a. 
   b. 

3. Who can support you and how?

   Target date for goal accomplishment: ________  Date(s) of goal status review: ________

D. COLLEGE / CAREER
(Opportunities to build your resume (can include extracurricular activities, clubs, volunteering, etc. that build resumes))

1. What extracurricular activities do you participate in? ________________________________________________
   _______________________________________________________________________________________

2. What are you involved in outside of school? _______________________________________________________
   _______________________________________________________________________________________

3. What are you interested in? _____________________________________________________________________
   _______________________________________________________________________________________

E. ADDITIONAL INFORMATION

1. Is there something you want to learn more about? ________________________________________________
   _______________________________________________________________________________________

2. What is your plan for next year? ______________________________________________________________
   _______________________________________________________________________________________

3. What else should I/we know about you? _________________________________________________________
   _______________________________________________________________________________________

Student Signature: ___________________________ Date: ________________
LPP Staff Signature: __________________________ Date: ________________