IACP Individual Academic and Career Plan

Personal Information

Name _____

Address _____

_____

Parent/Guardian Name _____

Graduation Year _____

Education History

Name of School	City and State
Elementary School(s)	
Middle Schools(s)	
High School(s) and/or Career-Technical Center(s)	
Technical School, College and/or University	

Contents

The IACP is part of the career development process and will assist you in planning for your future.

Required:

- Personal Information
- Course Plan
- Career Plan
- Assessment Record
  - Results of Career Interest and Aptitude Surveys and Assessments
  - Passage of Ohio 8th Grade Achievement Assessment and Ohio Graduation Test
- SCANS Activities
- Occupational Skills
- Career Skills

Recommended:

- Résumé and Cover Letter
- Letters of Recommendation
- Career Narrative
- Record of awards earned
- Academic and career-related classroom work
- Career-Technical Education competency test results (if applicable)
- College and postsecondary admission test results (if applicable)
- Individual Transition Plan (ITP, if applicable)
- Other items deemed appropriate

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Career Plan

Circle one: Grade 8 9 10 11 12

Begin your career planning by responding to the statements below. Since your career plans may change over time, you should complete a copy of this form each year. This document is only a tool to identify career and educational goals. It will not guarantee employment in a specific job. After you complete this form, go on to the Course Plan to map your courses from grade eight through twelve.

After High School, I plan to:

- ☐ Work full time
- ☐ Work part time and attend school
- ☐ Attend a two- or four-year postsecondary institution full time
- ☐ Attend technical school full time
- ☐ Enter the military as a career

1) What is your career goal(s)?

_____

_____

_____

2) What interests, skills and knowledge support your career goals?

_____

_____

_____

3) What courses do you plan to take in high school to reach your goal(s)?

_____

_____

_____

4) What do you plan to do after high school to reach your goal(s)?

_____

_____

_____

5) What activities and skill training will you need to learn outside of school to reach your career goal(s)?

_____

_____

_____

6) What degree, certification, licensure, or specialized training will you need for your chosen career?

_____

_____

_____

7) Has your career goal(s) changed since last year? Since the eighth grade?

_____

_____

_____

8) What other career goals(s) and educational plans have you considered as a second choice?

_____

_____

_____

Approval of Career Plan:

I support this Academic and Career Plan

_____

Student signature Date

_____

Parent/Guardian signature Date

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Course Plan

Circle one: Grade 8 9 10 11 12

Begin your course planning by identifying your chosen career cluster. You should review your Course Plan annually and make changes and updates as needed. This form will help you decide on the most appropriate educational options to help you reach your career goals. You should use your school's course catalog to determine which courses are offered by your school or Career-Technical Center. Be sure to talk with your parent/guardian and teacher/counselor to help you make final decisions.

Extracurricular experiences and activities to support my career goals:

_____

_____

_____

_____

Career Cluster

Select the career cluster(s) that best fits your career goal(s).

- ☐ Agriculture, Food & Natural Resources
- ☐ Architecture & Construction
- ☐ Arts, Audio/Video Technology & Comm.
- ☐ Business Management & Administration
- ☐ Education & Training
- ☐ Finance
- ☐ Government & Public Administration
- ☐ Health Science
- ☐ Hospitality & Tourism
- ☐ Human Services
- ☐ Information Technology
- ☐ Law, Public Safety, Corrections & Security
- ☐ Manufacturing
- ☐ Marketing
- ☐ Science, Technology, Engineering & Math
- ☐ Transportation, Distribution & Logistics

Graduation Requirements			9th Grade	Semester			10th Grade	Semester			11th Grade	Semester			12th Grade	Semester		
Student Choice																		
Subject	Units	Units	Subject	1st	2nd	Cr	Subject	1st	2nd	Cr	Subject	1st	2nd	Cr	Subject	1st	2nd	Cr
English																		
Math																		
Science																		
Social Studies																		
Health																		
Phys. Ed.																		
Total																		

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Assessment Record

A record of the assessments that you have taken is an important tool to use to guide you on your career path. Record the results of tests and assessments that you have taken in the appropriate areas. Identify the date taken, assessment tool and your results with appropriate comments.

Achievement Assessments	Career Interest	Career Aptitude	Other
8th Grade (requirement met) Reading _____ Math_____ Science _____ Social Studies_____	Date_____ Tool_____ Results_____ Comments_____	Date_____ Tool_____ Results_____ Comments_____	Date_____ Tool_____ Results_____ Comments_____
12th Grade (requirement met) Reading _____ Writing _____ Math _____ Science_____ Social Studies _____	Date_____ Tool_____ Results_____ Comments_____	Date_____ Tool_____ Results_____ Comments_____	Date_____ Tool_____ Results_____ Comments_____
Comments_____	Date_____ Tool_____ Results_____ Comments_____	Date_____ Tool_____ Results_____ Comments_____	Date_____ Tool_____ Results_____ Comments_____

SCANS Competencies (**S**ecretary's **C**ommission on **A**chieving **N**ecessary **S**kills)

Listed below are five competencies necessary for workplace successes, as identified by SCANS research. Use this activity to describe your abilities to perform school-to-work skills. As you demonstrate specific skills, write a brief description in the appropriate space.

Resources: Identifies, organizes, plans and uses resources and time effectively.

Interpersonal: Works as a team member, teaches others, serves customers, leads, negotiates, and works successfully with people from diverse backgrounds.

Information: Acquires and uses information and data, organizes and maintains files, interprets and communicates, and uses computers to process information.

Systems: Understands complex interrelationships, monitors and corrects performance and improves systems.

Technology: Works with a variety of technologies and applies them to specific tasks.

Occupational Skills

Use this activity to record work-based experiences that relate to your career goal, or to identify those work-based experiences you would like to have. As you write a brief description in the appropriate space, indicate whether it is a goal or an actual experience. You may include longer reports of your actual experiences separately in your IACP.

Exploration/Job Shadowing

Mentoring

Internship/Co-Op

Community/Service Learning

Work Experience

College Tech Prep, Career-Technical Education, International Baccalaureate Diploma, etc.

Career Skills Checklist

Use this checklist to help ensure that you have obtained the skills to develop education plans and career goals. When you demonstrate specific skills, you will check the box next to them. Keep this form in your Individual Academic and Career Plan folder so you that can assess your skills each year. Provide comments, as appropriate, to document your understanding.

- ☐ I have updated (and changed, if needed) my Career Plan and Course Plan (9__); (10 __); (11 __); (12 __).
  Comments:
- ☐ I know my interests and work traits.
  Comments:
- ☐ I know and can describe my academic strengths.
  Comments:
- ☐ I know how to locate and use career information resources.
  Comments:
- ☐ I understand various career clusters.
  Comments:
- ☐ I can describe the educational options available to me.
  Comments:
- ☐ I know the high school graduation requirements.
  Comments:
- ☐ I know the educational requirements to reach my chosen career goal.
  Comments:
- ☐ I understand labor market trends for my chosen career goals.
  Comments:
- ☐ I have discussed my current educational plans and career goals with my parent/guardian and counselor/teacher.
  Comments:
- ☐ I can identify local job opportunities.
  Comments:
- ☐ I can identify nontraditional career options.
  Comments:
- ☐ I can identify job-seeking and application skills.
  Comments:
- ☐ I have discussed my plans for after high school with my parent/guardian and counselor/teacher.
  Comments:
- ☐ I have taken action on my plans for after high school.
  Comments: