A Guide for Transition Planning

The following questions will help you think about the services your son or daughter will need after leaving the public school system. Please place a check next to the item or items that you would like more information about, or write down any ideas that you want included in your son or daughter’s transition plan.

1. Name of Student________________________ Date Form Filled Out__________________

2. Date of Birth: ___________________________ School Exit Date: ______________________

3. Plan of Graduation: Diploma_____  Modified Diploma____
                             Extended Diploma_____  Alternative Certificate____

4. What are your current post high school plans for your son or daughter? What do you need more information about?

   Community Education
   Community College __
   Technical Training __
   Armed Forces __
   4 Year College __
   Other __

   Housing
   Living at Home ___
   Independent ___
   Apartment ___
   Other ___

   Vocational
   Job ___
   More Training ___
   Volunteer Work ___
   No Plans ___
   Other ___

   Continuing Education
   Placement Options ___
   Financial ___
   Accommodations___

   Social Legal
   Counseling ___
   Rights/Liabilities ___

   Employment:
   Career Plan ___
   Work Placement ___
   Work Training ___
   Transportation ___

   Medical
   Oregon Health Plan ___
   Insurance ___
   Low Cost/Free ___
   Under Parent Ins ___

   Leisure/Recreation
   Locating Programs ___
   Transportation ___
   Financial Support ___
   Other: ___

5. Please check the items you feel that your son or daughter will need assistance in for post-school planning, or check items that you need more information about.

   Employment:
   Career Plan ___
   Work Placement ___
   Work Training ___
   Transportation ___

   Housing
   Placement ___
   Independent Living ___
   Training ___
   Transportation ___

   Medical
   Oregon Health Plan ___
   Insurance ___
   Low Cost/Free ___
   Under Parent Ins ___

   Leisure/Recreation
   Locating Programs ___
   Transportation ___
   Financial Support ___
   Other: ___
6. What most concerns you about the future of your son or daughter?

7. Are you aware of any community agencies that will or might be involved with your son/daughter?

8. What could the school district staff do to assist you in the planning of your son or daughter’s post-school needs?

Additional comments or questions.