

GRADUATION TRANSITIONS PROGRAM TRACKING SHEET

Student Name: _____
Last First

Student Number: _____ Grade: _____ Presentation Date: _____

Advisory Teacher: _____ Advisory # _____

REQUIREMENT TO COMPLETE PORTFOLIO	REFERENCE	COMPLETE	Advisory Teacher's Initials
Personal Health Section			
Assignment	Healthy Living Plan (due Nov. 25)	pp. 8-9	<input type="checkbox"/>
<i>discussion</i>	I – Sound Nutritional Habits	p.9	<input type="checkbox"/>
<i>discussion</i>	II – Regular Exercise Routines	p.9	<input type="checkbox"/>
<i>discussion</i>	III – Emotional Health Management	p.9	<input type="checkbox"/>
<i>discussion</i>	IV – Positive Health Choices	p.9	<input type="checkbox"/>
Community Connections Section			
30 Hours Work/Volunteer	Package Completed/Signed (due Jan. 26 to office)	pp. 10-13	<input type="checkbox"/>
Resume	Updated + word processed (due Nov. 25)		<input type="checkbox"/>
<i>discussion</i>	Employability Skills and Benefits (due Dec. 9)	pp. 12-13	<input type="checkbox"/>
Career and Life Section			
Assignment + <i>discussion</i>	Comprehensive Transition Plan: evidence (collection of material) <input type="checkbox"/> AND written reflection <input type="checkbox"/> (due Dec. 9)	pp. 14-17 pp. 15, 17	<input type="checkbox"/>
Assignment	Career Cruising (due Dec. 9)	p. 18	<input type="checkbox"/>
<i>discussion</i>	My Plans After High School (due Dec. 9)	p. 19	<input type="checkbox"/>
Assignment	Complete + discuss <u>Financial Plan</u> (due Dec. 9)	p. 20-21, last page	<input type="checkbox"/>
Presentation Section			
Presentation	Portfolio successfully completed + presented to Advisory teacher (due May 5)	pp. 23-24	<input type="checkbox"/>

For Staff Use Only – Graduation Transitions Program Facilitator	
(CHECK ONE) GT Program COMPLETE _____ complete _____	Program NOT _____
Ministry Mark: RM	or _____