

## Char-Em ISD Post-Secondary Transition Outcome Plan

Student Name:

Date:

Completed By:

Purpose: Together we will use this collaborative process to gather individual student information to build a successful transition to a quality life.

<b>List Transition Assessment and Data to be considered:</b>
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<b>HOUSING</b> <i>Independent Living</i>	<b>DAILY LIVING</b> <i>Independent Living</i>	<b>COMMUNITY ACCESS AND PARTICIPATION</b>	<b>EMPLOYMENT AND VOLUNTEERING</b>	<b>EDUCATION AND TRAINING</b>
Options Discussed: Option Selected: Strengths/Preferences:  Needs:	Strengths/Preferences:  Needs:	Strengths/Preferences:  Needs:	Options Discussed: Option Selected: Strengths/Preferences:  Needs:	Options Discussed: Option Selected: Strengths/Preferences:  Needs:

**Formula for post-secondary goals below:** (After graduation, high school, completion of programming) (Student) will (Behavior) (Where and How)

<b><i>Independent Living</i></b>	<b><i>Independent Living</i></b>	<b><i>Independent Living</i></b>	<b><i>Employment</i></b>	<b><i>Education and Training</i></b>
<i>Possible Postsecondary Measurable Outcomes (Goal) to address Independent Living:</i>	<i>Possible Postsecondary Measurable Outcomes (Goal) to address Independent Living:</i>	<i>Possible Postsecondary Measurable Outcomes (Goal) to address Independent Living:</i>	<i>Postsecondary Measurable Outcomes (Goal) to address Employment:</i>	<i>Postsecondary Measurable Outcomes (Goal) to address Education:</i>  <b>AND/OR</b> <i>Postsecondary Measurable Outcomes (Goal) to address Training:</i>
*If a Post-secondary measureable goal is written for this category, an annual goal must be written to address.	*If a Post-secondary measureable goal is written for this category, an annual goal must be written to address.	*If a Post-secondary measureable goal is written for this category, an annual goal must be written to address.	**Annual goal must reflect Post-Secondary Goals in Employment.	**Annual goal must reflect Post-Secondary Goals in Education/Training.

<b>Transition Service Area</b>	<b>Transition Activity/Service</b>	<b>Who is the Lead on this Action?</b>	<b>By When?</b>
Instruction			
Community Experience			
Post-School Adult Living			
Employment			
Daily Living Skills			
Functional Vocational Evaluation			

<b>Additional Action Plan</b>	<b>Action</b>	<b>Who is the lead on this Action?</b>	<b>By When?</b>