**PERSONAL LEARNING BLUEPRINT**

**PARTICIPANT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INSTRUCTIONS**

Your Personal Learning Blueprint (Blueprint) uses information from the three tools in the CWP Career Competency System:

* Career Interest Inventory
* Personal Development Profile
* Competency Learning Plan

Complete the sections under each of the following categories to create goals for this program year. This Blueprint should be referred to throughout the duration of the program. Update your goals as you achieve them! This Blueprint should be reviewed and updated according to your program’s schedule.

**PERSONAL DEVELOPMENT GOALS**

Review your completed Personal Development Profile and identify one external asset and one internal asset that you want to work on throughout the program.

|  |  |  |
| --- | --- | --- |
| What EXTERNAL asset will you work on? | What is your plan for helping yourself with this? | Target Date |
|  |  |  |
| 1) What progress did you make on this? | Date Completed |
|  |  |

|  |  |  |
| --- | --- | --- |
| What INTERNAL asset will you work on? | What is your plan for helping yourself with this? | Target Date |
|  |  |  |
| 2) What progress did you make on this? | Date Completed |
|  |  |

**CAREER INTEREST GOALS**

Review your completed Career Interest Inventory and identify up to 5 careers that interest you most.

|  |
| --- |
| What are the careers that interest you the most? (List up to 5 occupations.) |
| 1 |
| 2 |
| 3 |
| 4 |
| 5 |
| What abilities do you have that relate to these careers? |
|  |

|  |
| --- |
| What education and/or training is necessary for these careers? |
|  |

|  |
| --- |
| What are two things you should do NOW to address the education/training requirements for your career choices? |
| 1.) | Target Date |
| What progress did you make on this? | Date Completed |
| 2.) | Target Date |
| What progress did you make on this? | Date Completed |

**COMPETENCY LEARNING PLAN GOALS**

Review your completed Competency Learning Plan and identify one basic skill and two competencies that you will focus on for this program year.

|  |  |  |
| --- | --- | --- |
| What BASIC SKILL will you work on? | What is your plan to improve in this skill area? | Target Date |
|  |  |  |
| 1) What progress did you make on this? | Date Completed |
|  |  |

|  |  |  |
| --- | --- | --- |
| What COMPETENCIES will you work on? | What is your plan to improve in this competency? | Target Date |
|  |  |  |
| 2) What progress did you make on this? | Date Completed |
|  |  |

**AGREEMENT**

By signing this Blueprint, I agree to do my best to achieve these goals that I have developed with the help of an adult. I understand that no one but me can achieve these goals, but that I am allowed to ask for help and should ask for help. I understand that the achievement of these goals is important for my future. I also understand that I can change my goals from year to year and that the most important thing for my success is to always have goals.

SIGNATURES

Enter the date completed for each review. Both the participant and facilitator must sign below after reviewing the Blueprint updates.

|  |
| --- |
| 1ST REVIEW DATE COMPLETED: |
| Student Signature | Teacher Signature |

|  |
| --- |
| 2ND REVIEW DATE COMPLETED: |
| Student Signature | Teacher Signature |

*\*\*This document is modified from The CWP Personal Learning Blueprint based* [*www.careercompentencies.org*](http://www.careercompentencies.org)