

HIGH SCHOOL GOAL:

Obtain High School Equivalency (HSE)

Complete this worksheet if the young person is enrolled in HSE program and is close to passing the TASC exam.

REQUIRED STEPS (COMPLETE ALL)	COMPLETED?	DATE	PROGRESS NOTES
<input type="checkbox"/> Monitor attendance and performance biweekly (check-in with the young person's Primary Person at the program)***	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Provide weekly persistence coaching, support, and encouragement (text, call, or meet)	<input type="checkbox"/> YES <input type="checkbox"/> NO		

POTENTIAL STEPS (EXPLORE IF NEEDED/APPLICABLE)	COMPLETED?	DATE	PROGRESS NOTES
<input type="checkbox"/> Work with young person to improve attendance; coach young person, text young person in the mornings	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Help young person re-engage/understand why school is important by connecting them to a peer group or credible messenger	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Help young person re-engage/understand why school is important by connecting them to an extracurricular program or experience in line with their interests to build self-esteem & help them envision pathway	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Help young person have a "breakthrough moment" by taking them on a trip or engaging in a new experience that broadens their horizons	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Speak to/meet with program staff regarding young person's attendance or performance	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Create a study plan	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Refer student to tutor	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Follow-up with tutor on performance***	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> Other:	<input type="checkbox"/> YES <input type="checkbox"/> NO		

***Fill in relevant information in space provided on reverse of worksheet.

***ONCE GOAL IS COMPLETED:**

- Proceed to Post Secondary Goals Roadmap (page 10) if the young person is still exploring Post Secondary pathways
- Proceed to College Goals Roadmap (page 12) if the young person enrolls in college (after completing all relevant Post Secondary Goals)
- Proceed to Career Development Goals Roadmap (page 14) if the young person enrolls in a vocational or other sector-based certificate program/post-secondary pathway or is engaging in exploring career experiences

GOAL TRACKING			
START DATE: _____	GOAL COMPLETED	DATE: _____	<input type="checkbox"/> GOAL CHANGED
YOUTH NAME: _____	<input type="checkbox"/> YES NOTES:		DATE: _____
COACH: _____	<input type="checkbox"/> NO NOTES:		NEW GOAL: _____
			NOTES:

ATTENDANCE RATE	DATE	NOTES

ADDITIONAL NOTES