

WYOMING COUNTY PERSONALIZED EDUCATION PLAN (PEP)

NAME: _____ Middle School: _____ High School _____

Last First MI

WVEIS ID # _____ BIRTH DATE: _____ HOME PHONE: _____

Select a Career Cluster	Grade	Career Interest	9th grade	2 Year Plan	10th grade	
<ul style="list-style-type: none"> • Agriculture, Food and Natural Resources AG • Architecture and Construction AR • Arts, A/V Tech. & Communication AV • Business Mgt. & Administration BM • Education and Training ED • Finance FI • Government & Public Admin. GO • Health Sciences HE • Hospitality and Tourism HO • Human Services HU • Information Technology IT • Law, Public Safety, Correction and Security LA • Manufacturing MA • Marketing MK • Science, Technology, Engineering and Mathematics ST • Transportation, Distribution and Logistics TR 	8th Gr.		<input type="checkbox"/> <input type="checkbox"/> English 9	<input type="checkbox"/> <input type="checkbox"/> English 10		
	9th Gr.		<input type="checkbox"/> <input type="checkbox"/> Algebra I <input type="checkbox"/> <input type="checkbox"/> Alg I Support	<input type="checkbox"/> <input type="checkbox"/> Geometry		
	10th Gr.		<input type="checkbox"/> <input type="checkbox"/> Earth and Space Science	<input type="checkbox"/> <input type="checkbox"/> Biology		
	11th Gr.		<input type="checkbox"/> <input type="checkbox"/> World Studies	<input type="checkbox"/> <input type="checkbox"/> U.S. Studies		
	12th Gr.		<input type="checkbox"/> <input type="checkbox"/> Health	<input type="checkbox"/> <input type="checkbox"/> Physical Education		
	CONCENTRATION			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
	(Refer to pp. 19-20 in <i>Program of Study</i>)			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
	<input type="checkbox"/> CTE Option 1			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
	4 core specified by program					
	<input type="checkbox"/> NON-CTE Option 2					
	2 in same World Language					
				11th grade	3 Year Plan	12th grade
<input type="checkbox"/> NON-CTE Option 3		4th Science course	<input type="checkbox"/> <input type="checkbox"/> English 11 or <input type="checkbox"/> <input type="checkbox"/> AP Lang.	<input type="checkbox"/> <input type="checkbox"/> English 12 or <input type="checkbox"/> <input type="checkbox"/> AP Lit. or	<input type="checkbox"/> <input type="checkbox"/> Transition English for Seniors	
4th Science course		AP/AC/DC or Capstone course	<input type="checkbox"/> <input type="checkbox"/> Algebra II or <input type="checkbox"/> <input type="checkbox"/> Financial Alg	<input type="checkbox"/> <input type="checkbox"/> Transition Math for Seniors	<input type="checkbox"/> <input type="checkbox"/> Math or	
Capstone course			<input type="checkbox"/> <input type="checkbox"/> Science or <input type="checkbox"/> <input type="checkbox"/> AP Science	<input type="checkbox"/> <input type="checkbox"/> Transition Math for Seniors	<input type="checkbox"/> <input type="checkbox"/> Civics for Next Generation or	
2 Cluster courses			<input type="checkbox"/> <input type="checkbox"/> Contemporary Studies or	<input type="checkbox"/> <input type="checkbox"/> AP Government and Politics	<input type="checkbox"/> <input type="checkbox"/> Elective	
List the 4 courses needed to attain career and post-secondary goals required for graduation.			<input type="checkbox"/> <input type="checkbox"/> AP Social Studies course	<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
4 Concentration Courses			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
1 _____			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
Credits Required for Graduation			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
26 -- Class of 2019, 2020, and 2021			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
24 -- Class of 2022 and following classes			<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	<input type="checkbox"/> <input type="checkbox"/> Elective	
			*See Chart V of WVBE Policy 2510 to clarify state graduation requirements.			

Assessments and Resources used to develop PEP: (examples: PSAT, GSA, interest inventories, etc.)

Note to STUDENT and PARENTS: This plan contains the minimum state requirements for graduation. Some counties, postsecondary institutions, programs, scholarships, and the NCAA require additional courses. My signature affirms I have checked with the institution(s) to determine course requirements and have selected coursework to meet these requirements.

PLANS FOR 1st YEAR AFTER HIGH SCHOOL: • 4 YR. COLLEGE • 2 YR. COLLEGE • TECHNICAL SCHOOL • MILITARY • WORKFORCE • OTHER

8th: _____ 9th: _____ 10th: _____ 11th: _____ 12th: _____

SIGNATURE PAGE

WVBE Policy 2510 REQUIREMENT: 5.3.b.3 When the PEP is finalized using the process described in the above sections, the counselors and/or student advisor actively engage the parent and student in a meeting where changes are made and signatures of the student and/or guardian are secured. The PEP is reviewed annually with the student and his or her parent and/or guardian and is signed and dated each annual review conference.

By signing the PEP, I acknowledge active involvement in the development of the PEP and agreement with course selections.

8th Grade

ADVISOR: _____ DATE: _____ STUDENT: _____ DATE: _____

COUNSELOR: _____ DATE: _____ PARENT: _____ DATE: _____

9th Grade

ADVISOR: _____ DATE: _____ STUDENT: _____ DATE: _____

COUNSELOR: _____ DATE: _____ PARENT: _____ DATE: _____

10th Grade

ADVISOR: _____ DATE: _____ STUDENT: _____ DATE: _____

COUNSELOR: _____ DATE: _____ PARENT: _____ DATE: _____

11th Grade

ADVISOR: _____ DATE: _____ STUDENT: _____ DATE: _____

COUNSELOR: _____ DATE: _____ PARENT: _____ DATE: _____

12th Grade

ADVISOR: _____ DATE: _____ STUDENT: _____ DATE: _____

COUNSELOR: _____ DATE: _____ PARENT: _____ DATE: _____