

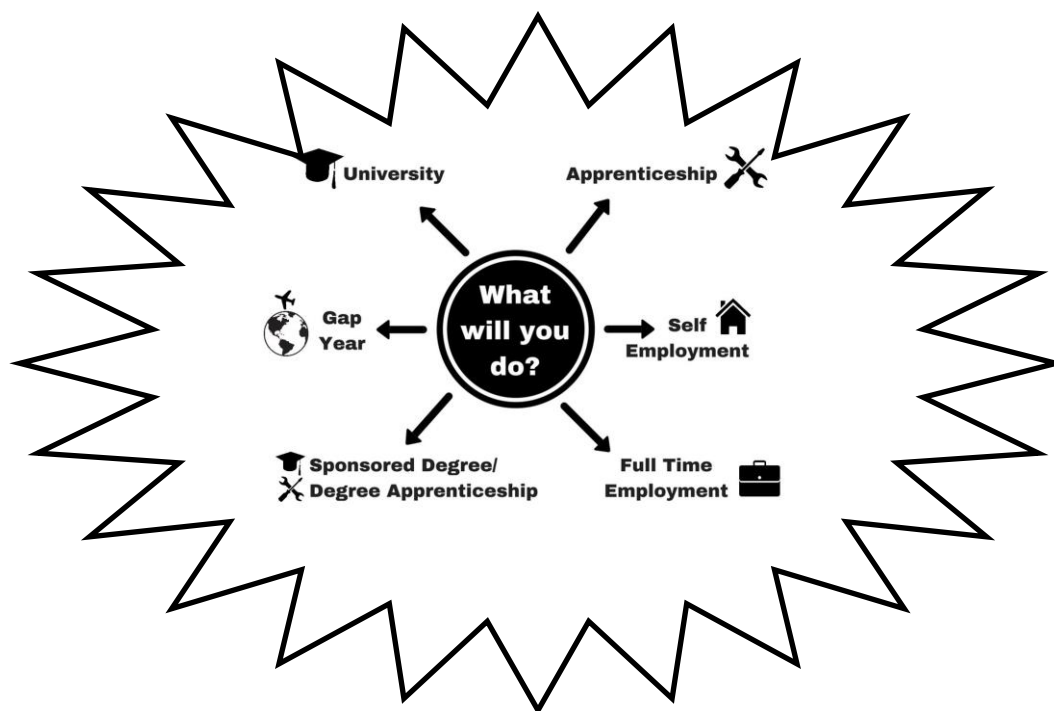
CAPSTONE

PLAN FOR TRANSITION TO WORK OR OTHER LIFE OPTIONS

Your Capstone Plan must include:

- ☐ Capstone questions and budget (included in this package)
- ☐ Current resume
- ☐ Reference Letter
- ☐ Cover letter or bursary/scholarship application

Submit your completed plan to the Career Centre.





SCHOOL DISTRICT NO. 91 (NECHAKO LAKES)

CAPSTONE

PLAN FOR TRANSITION TO WORK OR OTHER LIFE OPTIONS

Student Name: (please print) _____ Grade: _____

Indicate what your plans are after graduation and describe briefly:

- ☐ Upgrade _____
- ☐ Employment Training Courses _____
- ☐ Employment _____
- ☐ Other _____

Use the following timeline to explain your short and long term goals allowing for changeable labour market and life situations.

	CAREER	PERSONAL
ONE YEAR AFTER GRADUATION		
TWO YEARS AFTER GRADUATION		
FIVE YEARS AFTER GRADUATION		
TEN YEARS AFTER GRADUATION		

What type of job do you hope to attain after finishing high school?

What personal goals will this career option help you achieve?

What potential for advancements are there in your career choice? What additional training will be required?

Describe the role of each of the following in building your future plans.

☐ Work: _____

☐ Leisure: _____

☐ Health: _____

☐ Family: _____

☐ Support Networks: _____

Attach the following documentation to your assignment sheet.

Please see your Career Coordinator for information and guidance to assist in the completion of these aspects.

- ☐ Resume
- ☐ Reference Letter
- ☐ Reference contact name (first & last) _____ ph.# _____
- ☐ Cover Letter

Complete the following MONTHLY BUDGET for after graduation

INCOME		EXPENSES	
Employment Earnings	\$ _____	Rent	\$ _____
Income Assistance	\$ _____	Hydro	\$ _____
Other Income	\$ _____	Heat	\$ _____
Scholarship/bursary gifts	\$ _____	Telephone	\$ _____
Other	\$ _____	Cable/Network	\$ _____
Are your expenses more than your income? If yes, explain how you cover them. _____ _____ _____ _____ _____ _____ _____ _____		Food	\$ _____
		Clothing	\$ _____
		Personal Hygiene	\$ _____
		Bus Pass	\$ _____
		Car Insurance	\$ _____
		Fuel	\$ _____
		Car Repairs	\$ _____
		Medical/Dental	\$ _____
		Entertainment	\$ _____
		Other	\$ _____
Total Income	\$ _____	Total Expenses	\$ _____

Please be advised that the totals do not have to match. If an expense is being covered by your parents/guardians/band, etc. please note that on the appropriate line.